2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000031846

Entity Name
HAROLD R. COLTMAN, LLC

Principal Place of Business	Mailing Address
8775 20TH ST, UNIT #438 VERO BEACH, FL 32966	8775 20TH ST, UNIT #438 VERO BEACH, FL 32966

01192006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1087583
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

NIGEL & UTRERA, P.A.
[illegible] SW 22ND ST.
[illegible] FLOOR
MIAMI, FL 33145

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The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

000000395884
01/30/06-80089-018 50.00

Filing Fee is $50.00
Due by May 1, 2006

MANAGING MEMBERS/MANAGERS

	MGR
	COLTMAN, HAROLD R
ADDRESS	8775 20TH ST, UNIT #438
CITY-ST-ZIP	VERO BEACH, FL 32966
ADDRESS	
CITY-ST-ZIP	
ADDRESS	
CITY-ST-ZIP	
ADDRESS	
CITY-ST-ZIP	
ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Harold Coltman 1-20-06 772 5625478

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #