

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 24, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000035160**

1. Entity Name

PAGOSA PARTNERS INDUSTRIAL, LLC



Principal Place of Business

1717 SECOND STREET  
SUITE A  
SARASOTA, FL 34236 US

Mailing Address

1717 SECOND STREET  
SUITE A  
SARASOTA, FL 34236 US

U00000445407  
03/07/06-80044-005 50.00



**DO NOT WRITE IN THIS SPACE**

02132006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

20-1156770

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

SHENKIN, RONALD R  
1717 2ND STREET, SUITE D  
SARASOTA, FL 34236

**DO NOT WRITE  
IN THIS SPACE**

8. 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)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE D  
NAME MALAMUD, NEIL N  
STREET ADDRESS 1717 SECOND STREET SUITE A  
CITY-ST-ZIP SARASOTA, FL 34236

TITLE D  
NAME SHENKIN, RONALD R  
STREET ADDRESS 1717 SECOND STREET SUITE D  
CITY-ST-ZIP SARASOTA, FL 34236

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

11. 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 X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

R 2/21/06