

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000035268

**FILED**  
**May 03, 2006**  
**Secretary of State**

**Entity Name:** CONRAD REAL ESTATE I, LLC

**Current Principal Place of Business:**

1128 WILLOWOOD CIRCLE  
GULF BREEZE, FL 32563

**New Principal Place of Business:**

921 OXFORD DRIVE  
ST. AUGUSTINE, FL 32084

**Current Mailing Address:**

1128 WILLOWOOD CIRCLE  
GULF BREEZE, FL 32563

**New Mailing Address:**

921 OXFORD DRIVE  
ST. AUGUSTINE, FL 32084

**FEI Number:** 18-6506193      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: CONRAD, THOMAS L  
Address: 10415 STAPLEFORD HALL DRIVE  
City-St-Zip: POTOMAC, MD 20854

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: THOMAS L. CONRAD

MGRM

05/03/2006

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date