## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000036354

Entity Name: PROVISION I. REAL ESTATE, LLC

FILED Apr 24, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3250 DARTMOUTH DRIVE 2153 GAME BIRD COURT TALLAHASSEE, FL 32317 TALLAHASSEE, FL 32311

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 16226 TALLAHASSEE, FL 323176226

Name:

FEI Number: 55-0879494 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MENCHION, KIMBERLY CLARK ESQ MENCHION, KIMBERLY CLARK ESQ 3250 DARTMOUTH DRIVE 2153 GAME BIRD COURT TALLAHASSEE, FL 32317 TALLAHASSEE, FL 32311 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: KIMBERLY C. MENCHION 04/24/2006

> Electronic Signature of Registered Agent Date

> > Name:

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM ( ) Delete Title: () Change () Addition

MENCHION, KIMBERLY CLARK Address: P.O. BOX 16226 Address: City-St-Zip: TALLAHASSEE, FL 323176226 City-St-Zip:

Title: MGRM ( ) Delete Title: () Change () Addition

Name: MENCHION, BYRON ALLEN Name: Address: P.O. BOX 16226 Address: City-St-Zip: TALLAHASSEE, FL 323176226 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 Statutés. 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: KIMBERLY C. MENCHION **MGRM** 04/24/2006