## **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

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DOCUMENT # L04000036780

1. Entity Name ROGERS FAMILY, LLC



Principal Place of Business

1314 EAST LAS OLAS BLVD., STE. 333 FORT LAUDERDALE, FL. 33301

Mailing Address

1314 EAST LAS OLAS BLVD., STE. 333 FORT LAUDERDALE, FL 33301

3020 RAVENSUS of Rood # 30

DANIA BEACH, FI - 33312

## May 05, 2006 8:00 am Secretary of State 05-05-2006 90025 033 \*\*\*\*55.00

20044468



02062006 No Chg-LLC

CR2E083 (11/05)

Applied For 4. FEI Number 41-2137943 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

ROGERS, WILLIAM 1314 EAST LAS OLAS BLVD., STE. 333 FORT LAUDERDALE, FL 33301

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<ol><li>The above named entity submits this statement for the purpose of chan</li></ol>	ging its registered office or registered agent, or both, in t	he State of Florida. I am familiar with, and	d accept
the obligations of registered agent			
SIGNATURE WILLIAM ROSCA		4/27/06	
Signifure, 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 NAME	MGR ROGERS, WILLIAM	
STREET ADDRESS CITY-ST-ZIP	1314 EAST LAS OLAS BLVD., STE. 333 FORT LAUDERDALE, FL 33301	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROGERS, PAUL R SR 1314 EAST LAS OLAS BLVD., STE. 333 FORT LAUDERDALE, FL. 33301	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. hereby	certify that the information supplied with this filing does not qualify for the ex	emptions conta

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es not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information ture shall have the same legal effect as if made under oath; that I am a managing member or manager of the to execute this report as required by Chapter 608, Florida Statutes. limited liability company or the

SIGNATURE:

V0901 PED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE