

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000047443

FILED  
Mar 23, 2006  
Secretary of State

**Entity Name:** SUNBELT REALTY BURNT STORE, L.L.C.

**Current Principal Place of Business:**

725 CAPE CORAL PKWY WEST  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

25020 HARBORSIDE BLVD  
PUNTA GORDA, FL 33955

**Current Mailing Address:**

725 CAPE CORAL PKWY WEST  
CAPE CORAL, FL 33914

**New Mailing Address:**

**FEI Number:** 20-1565838      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WATT-BIGGS, BARBARA  
725 CAPE CORAL PKWY WEST  
CAPE CORAL, FL 33914      US

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

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: MGR      ( ) Delete  
Name: WATT-BIGGS, BARBARA  
Address: 725 CAPE CORAL PKWY WEST  
City-St-Zip: CAPE CORAL, FL 33914

Title: MGR      ( ) Delete  
Name: PEARCE, DANIEL W  
Address: 2624 SW 37TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33914

**ADDITIONS/CHANGES:**

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

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: BARBARA WATT-BIGGS      MGR      03/23/2006

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