

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048101

Entity Name: SPACECOAST SURPLUS, L.L.C.

FILED  
Jan 21, 2006  
Secretary of State

## Current Principal Place of Business:

525 KELLYGREEN DRIVE  
ORLANDO, FL 32828

## New Principal Place of Business:

623 OAKWOOD PLACE  
TITUSVILLE, FL 32780

## Current Mailing Address:

525 KELLYGREEN DRIVE  
ORLANDO, FL 32828

## New Mailing Address:

623 OAKWOOD PLACE  
TITUSVILLE, FL 32780

FEI Number: 20-1284928

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GATTON, ROBERT D ESQ  
390 NORTH ORANGE AVENUE, STE. 1100  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

PANIK, KEVIN R  
623 OAKWOOD PLACE  
TITUSVILLE, FL 32780 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: KEVIN ROSS PANIK

01/21/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MRS ( ) Delete  
Name: HOOPPER, JULIE K OWNER  
Address: 525 KELLYGREEN DRIVE  
City-St-Zip: ORLANDO, FL 32828 US

Title: MR (X) Delete  
Name: HOOPPER, ANDREW R OWNER  
Address: 525 KELLYGREEN DRIVE  
City-St-Zip: ORLANDO, FL 32828 US

Title: MR (X) Delete  
Name: PANIK, KEVIN R OWNER  
Address: 623 OAKWOOD PLACE  
City-St-Zip: TITUSVILLE, FL 32780

## ADDITIONS/CHANGES:

Title: MR (X) Change ( ) Addition  
Name: PANIK, KEVIN R OWNER  
Address: 623 OAKWOOD PLACE  
City-St-Zip: TITUSVILLE, FL 32780 US

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: KEVIN ROSS PANIK

MR

01/21/2006

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