


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Jan 10, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # L04000050061</b>		
1. Entity Name 2031 12TH STREET LLC		
Principal Place of Business 4130 BOCA POINTE DRIVE SARASOTA, FL 34238	Mailing Address 4130 BOCA POINTE DRIVE SARASOTA, FL 34238	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  HAUTAMAKI, RAYMOND D 4130 BOCA POINTE DRIVE SARASOTA, FL 34238		<b>DO NOT WRITE IN THIS SPACE</b>
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$50.00 Due by May 1, 2006		
<b>9. MANAGING MEMBERS/MANAGERS</b>		<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HAUTAMAKI, RAYMOND 4130 BOCA POINTE DR. SARASOTA, FL 34238	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HAUTAMAKI, ANN L 4130 BOCA POINTE DR. SARASOTA, FL 34238	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.  <b>Ann L. HAUTAMAKI</b> SIGNATURE: <i>Ann L. Hautamaki</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		



01052006No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
20-1307176

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

U00000381287  
01/11/06-80047-017 50.00

**DO NOT WRITE  
IN THIS SPACE**

1-5-06

941-925-4802

Date

Daytime Phone #