

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000050660

1. Entity Name
MAHAN TRADERS OF FLORIDA, LLC



Principal Place of Business
444 SEABREEZE BLVD.
SUITE 200
DAYTONA BEACH, FL 32118

Mailing Address
444 SEABREEZE BLVD.
SUITE 200
DAYTONA BEACH, FL 32118



02202006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1416876

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

DANIELS, DOUGLAS A
501 NORTH GRANDVIEW AVENUE
DAYTONA BEACH, FL 32118

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME BAH, SAHJEEV
STREET ADDRESS 444 SEABREEZE BLVD., SUITE 200
CITY ST ZIP DAYTONA BEACH, FL 32118

TITLE MGR
NAME BAH, RASHMI
STREET ADDRESS 444 SEABREEZE BLVD., SUITE 200
CITY ST ZIP DAYTONA BEACH, FL 32118

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00000445587
03/07/06-80052-018 50.00

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IN THIS SPACE**

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.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/24/06

Date

386-255-2577

Daytime Phone #