


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90151 046 ****50.00

DOCUMENT # L04000054588 1. Entity Name FOOTPRINTS IV, LLC					
Principal Place of Business 12301 N 52ND ST TEMPLE TERRACE, FL 33617			Mailing Address 12301 N 52ND ST TEMPLE TERRACE, FL 33617		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01172006 Chg-LLC CR2E083 (11/05)	
Zip		Country		4. FEI Number 20-1444550	
				5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
TOMASINO, SHERRILL M 12301 N 52ND STREET TEMPLE TERRACE, FL 33617				Name Street Address (P.O. Box Number is Not Acceptable) City	
				FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NASH, REBECCA J		NAME		
STREET ADDRESS	12108 N RIVERHILLS DR		STREET ADDRESS	TEMPLE TERRACE, FL 33617	
CITY - ST - ZIP	TEMPEL TERRACE, FL 33617		CITY - ST - ZIP		
TITLE	VPD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TOMASINO, PAUL		NAME		
STREET ADDRESS	12301 N 52ND ST		STREET ADDRESS		
CITY - ST - ZIP	TEMPLE TERRACE, FL 33617		CITY - ST - ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NASH, JERRY E		NAME		
STREET ADDRESS	12108 N RIVERHILLS DR		STREET ADDRESS		
CITY - ST - ZIP	TEMPLE TERRACE, FL 33617		CITY - ST - ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TOMASINO, SHERRILL M		NAME		
STREET ADDRESS	12301 N 52ND ST		STREET ADDRESS		
CITY - ST - ZIP	TEMPLE TERRACE, FL 33617		CITY - ST - ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			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.					
SIGNATURE: <i>Sherrill M. Tomasino</i>			1/26/06 813.988.9103 x107		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		