## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

City-St-Zip

## FILED Feb 16, 2006 08:00 AM **DOCUMENT # L04000059529** Secretary of State MOSS & POST, LLC Principal Place of Business Mailing Address 7854 SADDLE CREEK TRAIL 7854 SADDLE CREEK TRAIL SARASOTA, FL 34241-9619 SARASOTA, FL 34241-9619 CR2E083 (11/05) 01052006No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1481649 Not Applicable \$5.00 Additional 5. Certificate of Status Desired $\Box$ 8. Name and Address of Current Registered Agent KURVIN, STEPHEN H ESQ. DO NOT WRITE 7 SOUTH LINE AVENUE SARASOTA, FL 34237 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, typed or printed name of registered agent and title if applicable. INCIE. Registered Agent signature required when reinstating? Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 3. MGRM 377) # HAME JUNG, KAREN M 7854 SADDLE CREEK TRAIL STREET ADDRESS City-ST-ZP SARASOTA, FL 342419619 TITLE \$145.ST STREET ADDRESS CITY-ST-ZIP TITLE NAME STRUCT ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE HALLE STREET ADDRESS EITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 7177 F HANK STREET ADDRESS

11. I hereby certify that the information supplied with this filling does not quality 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.

SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE