


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000061448

1. Entity Name
99TH, L.L.C.



Principal Place of Business
**3300 UNIVERSITY DRIVE, STE. 901
 CORAL SPRINGS, FL 33065**

Mailing Address
**3300 UNIVERSITY DRIVE, STE. 901
 CORAL SPRINGS, FL 33065**

DO NOT WRITE IN THIS SPACE



02062006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-0940755

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**PONNOCK, ANDREW A ESQ
 3300 UNIVERSITY DRIVE, STE. 901
 CORAL SPRINGS, FL 33065**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

100000436097
 02/27/06-80024-004 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM PONNOCK, ANDREW 3300 UNIVERSITY DRIVE SUITE 901 CORAL SPRINGS, FL 33065
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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:  **2/16/06** **954-340-4057**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #