

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 24, 2006 8:00 am**  
**Secretary of State**

02-24-2006 90242 035 \*\*\*\*50.00

**DOCUMENT # L04000062930**

1. Entity Name  
**FCLC PEARLAND, LLC**



Principal Place of Business  
**300 INTERNATIONAL PARKWAY, SUITE 130  
HEATHROW, FL 32746**

Mailing Address  
**300 INTERNATIONAL PARKWAY, SUITE 130  
HEATHROW, FL 32746**

**20010166**



2. Principal Place of Business  
**300 International Pkwy**

3. Mailing Address  
**300 International Pkwy**

Suite, Apt. #, etc.  
**Suite 300**

Suite, Apt. #, etc.  
**Suite 300**

01072006 Chg-LLC CR2E083 (11/05)

City & State  
**Heathrow, Fl.**

City & State  
**Heathrow, Fl.**

4. FEI Number  
**20-1543574**

Applied For  
☐ Not Applicable

Zip  
**32746**

Country  
**USA**

Zip  
**32746**

Country  
**USA**

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

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**CHRISTY, KATHERINE A  
300 INTERNATIONAL PARKWAY, SUITE 130  
HEATHROW, FL 32746**

Name  
**Christy, Katherine A**

Street Address (P.O. Box Number is Not Acceptable)  
**300 International Pkwy Suite 300**

City  
**Heathrow, FL** Zip Code  
**32746**

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 *Katherine A. Christy* *2/20/06*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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  
**MGRM** ☐ Delete

NAME  
**SELBY, C. THOMAS**

STREET ADDRESS  
**300 INTERNATIONAL PARKWAY, SUITE 130**

CITY - ST - ZIP  
**HEATHROW, FL 32746**

TITLE  
**MGRM** ☐ Change ☐ Addition

NAME  
**Selby C. Thomas**

STREET ADDRESS  
**300 international Pkwy Suite 300**

CITY - ST - ZIP  
**Heathrow, Fl. 32746**

TITLE  
☐ Delete

NAME

STREET ADDRESS

CITY - ST - ZIP

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☐ Change ☐ Addition

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.

SIGNATURE: *C. Thomas Selby* *2/20/06* *407-333-1604*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #