

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000066479

Entity Name: CPR FLORIDA LLC

FILED
Jan 13, 2006
Secretary of State

Current Principal Place of Business:

7901 SW 6TH COURT
SUITE 400
PLANTATION, FL 33324 US

New Principal Place of Business:

2763 MEADOWOOD DRIVE
WESTON, FL 33332 US

Current Mailing Address:

7901 SW 6TH COURT
SUITE 400
PLANTATION, FL 33324 US

New Mailing Address:

2763 MEADOWOOD DRIVE
WESTON, FL 33332 US

FEI Number: 20-1977845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, GARY ESQ.
202 S ROME AVENUE
SUITE 100
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MR. () Delete
Name: ROLLINSON, CHARLES H MGR
Address: 7901 SW 6TH COURT, SUITE 400
City-St-Zip: PLANTATION, FL 33324

Title: MRS. () Delete
Name: ROLLINSON, PATRICIA MGR
Address: 7901 SW 6TH COURT, SUITE 400
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

Title: MR. (X) Change () Addition
Name: ROLLINSON, CHARLES H MGR
Address: 2763 MEADOWOOD DRIVE
City-St-Zip: WESTON, FL 33332

Title: MRS. (X) Change () Addition
Name: ROLLINSON, PATRICIA MGR
Address: 2763 MEADOWOOD DRIVE
City-St-Zip: WESTON, FL 33332

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: CHARLES H. ROLLINSON III

MGR

01/13/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date