

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000067387

FILED
Aug 07, 2006
Secretary of State

Entity Name: ATLAST PARTNERS, L.L.C.

Current Principal Place of Business:

822 NORTH HIGHWAY A1A
BUILDING C, SUITE 207
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

159 HAMPTON POINT DRIVE
SUITE 1
ST. AUGUSTINE, FL 32092

Current Mailing Address:

822 NORTH HIGHWAY A1A
BUILDING C, SUITE 207
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

450 GREEN BAY ROAD
SUITE 409
WINNETKA, IL 60093

FEI Number: 20-1612744 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DELARME, CHRISTOPHER D
822 NORTH HIGHWAY A1A
BUILDING C, SUITE 207
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

DELARME, CHRISTOPHER D
159 HAMPTON POINT DRIVE
SUITE 1
ST. AUGUSTINE, FL 32092 US

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:

08/07/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DELARME, CHRISTOPHER D
Address: 822 NORTH HIGHWAY A1A, BLDG. C, STE. 207
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGRM () Delete
Name: SKALLA, JOHN M
Address: 560 GREEN BAY ROAD, SUITE 405
City-St-Zip: WINNETKA, IL 60093

Title: MGRM () Delete
Name: COMPANARO, RICHARD W
Address: 822 NORTH HIGHWAY A1A, BLDG. C, STE. 207
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DELARME, CHRISTOPHER D
Address: 450 GREEN BAY ROAD, SUITE 409
City-St-Zip: WINNETKA, IL 60093

Title: MGRM (X) Change () Addition
Name: SKALLA, JOHN M
Address: 560 GREEN BAY ROAD, SUITE 409
City-St-Zip: WINNETKA, IL 60093

Title: MEM. (X) Change () Addition
Name: COMPANARO, RICHARD W
Address: 822 NORTH HIGHWAY A1A, BLDG. C, STE. 207
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: CHRISTOPHER D. DELARME

MGRM

08/07/2006

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