2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 14, 2006
Secretary of State

DOCUMENT# L04000072601

Entity Name: LA STRADA CONSTRUCTION, LLC

Current Principal Place of Business:

809 WALKERBILT ROAD
SUITE 6
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

809 WALKERBILT ROAD
SUITE 6
NAPLES, FL 34110 US

New Mailing Address:

FEI Number: 54-2160664 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GUNTHER, CURTIS J
809 WALKERBILT ROAD
SUITE 6
NAPLES, FL 34110 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: MGRM ( ) Delete
Name: GUNTHER, CURTIS J
Address: 2031 CASTLE GARDEN LANE
City-St-Zip: NAPLES, FL 34110 US

Title: MGRM ( ) Delete
Name: GUNTHER, DON J
Address: 9766 BENT GRASS BEND
City-St-Zip: NAPLES, FL 34108 US

Title: MGRM ( ) Delete
Name: BAYER, CARLOS A
Address: 4130 5TH AVENUE SW
City-St-Zip: NAPLES, FL 34119 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: GUNTHER, CURTIS J
Address: 3244 MONTARA
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: CURTIS GUNTHER MGRM 03/14/2006

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