


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 27, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # L04000073632  
 1. Entity Name  
 3850 TAMPA ROAD LLC



Principal Place of Business 3850 TAMPA ROAD, SUITE 202 PALM HARBOR, FL 34684	Mailing Address 3850 TAMPA ROAD, SUITE 202 PALM HARBOR, FL 34684
--	--

**DO NOT WRITE IN THIS SPACE**



03142006 No Chg-LLC CR2E093 (11/05)

4. FEI Number 41-2156627	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 EKONOMIDES, NICKOLAS C ESQ  
 791 BAYWAY BOULEVARD  
 CLEARWATER, FL 33787

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCLAUGHLIN, TIMOTHY T 3850 TAMPA ROAD, SUITE 202 PALM HARBOR, FL 34684
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARTE, IDELFIA 3850 TAMPA ROAD, SUITE 202 PALM HARBOR, FL 34684
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1101000482406  
 04/11/06-80072-024 50.00

**DO NOT WRITE IN THIS SPACE**

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 606, Florida Statutes.

SIGNATURE: *Idelfia Marte* — 3/22/06  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #