2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 12, 2006
Secretary of State

DOCUMENT# L04000080830

Entity Name: MORGAN TANNER REALTY, L.L.C.

Current Principal Place of Business:

235 NE 4TH AVENUE, SUITE 101
DELRAY BEACH, FL 33483

New Principal Place of Business:

1115 NORTH SWINTON AVENUE
DELRAY BEACH, FL 33444

Current Mailing Address:

235 NE 4TH AVENUE, SUITE 101
DELRAY BEACH, FL 33483

New Mailing Address:

1115 NORTH SWINTON AVENUE
DELRAY BEACH, FL 33444

FEI Number: 73-1722165 **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:

KOPLAS, ANN
235 NE 4TH AVENUE, SUITE 101
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

KOPLAS, ANN
1115 NORTH SWINTON AVENUE
DELRAY BEACH, FL 33444 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: ANN L. KOPLAS 07/12/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: KOPLAS, ANN L
Address: 235 NE 4TH AVENUE, SUITE 101
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: KOPLAS, ANN L
Address: 1115 NORTH SWINTON AVENUE
City-St-Zip: DELRAY BEACH, FL 33444

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: ANN L. KOPLAS MGR 07/12/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date