

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083922

FILED
Apr 26, 2006
Secretary of State

Entity Name: LEE SOMMER, LLC

Current Principal Place of Business:

1628 BAYWINDS LANE
SARASOTA, FL 34231 US

New Principal Place of Business:

7628 CHARLESTON STREET
BRADENTON, FL 34201 US

Current Mailing Address:

P.O. BOX 49432
SARASOTA, FL 34230

New Mailing Address:

FEI Number: 20-1929338 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

W. BARTLETT SCOVILL, P.A.
1605 MAIN STREET
SUITE 912
SARASOTA, FL 34236 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: LEE, MELINDA
Address: P.O. BOX 49432
City-St-Zip: SARASOTA, FL 34230 US

Title: MGRM () Delete
Name: SOMMER, GREGORY
Address: P.O. BOX 49432
City-St-Zip: SARASOTA, FL 34230 US

Title: MGRM () Delete
Name: CARTER, LINDA
Address: P.O. BOX 49432
City-St-Zip: SARASOTA, FL 34230 US

ADDITIONS/CHANGES:

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

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: GREGORY SOMMER

MGRM

04/26/2006

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