

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000085451

Entity Name: INDECO THREE, LLC

FILED  
Apr 26, 2006  
Secretary of State

**Current Principal Place of Business:**

399 N. CYPRESS DRIVE  
TEQUESTA, FL 33469

**New Principal Place of Business:**

**Current Mailing Address:**

399 N. CYPRESS DRIVE  
TEQUESTA, FL 33469

**New Mailing Address:**

FEI Number: 20-2290770

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOURASSA, JOHN H  
399 N. CYPRESS DRIVE  
TEQUESTA, FL 33469 US

**Name and Address of New Registered Agent:**

BOURASSA, JOHN H  
399 N. CYPRESS DRIVE  
TEQUESTA, FL 33469 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:

04/26/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BOURASSA, JOHN  
Address: 399 N. CYPRESS DRIVE  
City-St-Zip: TEQUESTA, FL 33469

Title: MGRM (X) Delete  
Name: BOURASSA, JOHN  
Address: 11891 U.S. HIGHWAY ONE, SUITE 201  
City-St-Zip: NORTH PALM BEACH, FL 33408

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BOURASSA, JOHN H  
Address: 399 N. CYPRESS DRIVE  
City-St-Zip: TEQUESTA, FL 33469

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: JOHN H. BOURASSA

MGRM

04/26/2006

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