

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAY -1 AM 9:15

DOCUMENT # L04000086588

1. Entity Name
SARASOTA COMMERCE INVESTMENTS, LLC



Principal Place of Business
12002 MIRAMAR PARKWAY
MIRAMAR, FL 33025

Mailing Address
12002 MIRAMAR PARKWAY
MIRAMAR, FL 33025

DO NOT WRITE IN THIS SPACE

01062006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1939153

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOWELL, DAVID M
12002 MIRAMAR PARKWAY
MIRAMAR, FL 33025

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SARASOTA COMMERCE PARK, LLC
STREET ADDRESS	12002 MIRAMAR PARKWAY
CITY-ST-ZIP	MIRAMAR, FL 33025
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	

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**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 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-19-06

Date

Daytime Phone #