

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 18, 2006 8:00 am**  
**Secretary of State**

04-18-2006 90044 001 \*\*\*100.00

**30005443**



<b>DOCUMENT # L04000090923</b> 1. Entity Name CHARLOTTE 1000 LLC					
Principal Place of Business 2655 N OCEAN DR 3RD FLOOR SINGER ISLAND, FL 33407			Mailing Address 2655 N OCEAN DR 3RD FLOOR SINGER ISLAND, FL 33407		
2. Principal Place of Business		3. Mailing Address 3540 Forest Hill Blvd			
Suite, Apt. #, etc.		Suite, Apt. #, etc. 203		03312006    Chg-LLC    CR2E083 (11/05)	
City & State		City & State West Palm Beach FL		4. FEI Number 20-2386952	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
Zip 33406		Country		Applied For Not Applicable	
6. Name and Address of Current Registered Agent  HEATON, GEORGE W 2655 N OCEAN DR 3RD FLOOR SINGER ISLAND, FL 33407			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL    Zip Code		
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 _____					
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>		<b>Make check payable to Florida Department of State</b>			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HEATON, GEORGE W 2655 N OCEAN DR, 3RD FLOOR SINGER ISLAND, FL 33407	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DENTRY, DEBORAH A 3540 FOREST HILL BLVD < # 203 WEST PALM BEACH, FL 33406	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DENTRY, DEBORAH A 3540 FOREST HILL BLVD < # 203 WEST PALM BEACH, FL 33406	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DENTRY, DEBORAH A 3540 FOREST HILL BLVD < # 203 WEST PALM BEACH, FL 33406	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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.					
<b>SIGNATURE:</b> <i>Deborah A Dentry</i> <i>Deborah A Dentry</i>				Date    4/17/06    Daytime Phone #    5614334810	