


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90007 024 ****50.00

DOCUMENT # L04000091840		
1. Entity Name VESTOR PROPERTIES 103, LLC		

Principal Place of Business 105 SARASOTA QUAY SARASOTA, FL 34236	Mailing Address 105 SARASOTA QUAY SARASOTA, FL 34236
--	--

20012690

2. Principal Place of Business 1886 Stickney Point Rd Suite, Apt. #, etc.	3. Mailing Address 1886 Stickney Point Rd Suite, Apt. #, etc.
---	---



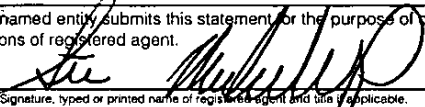
02072006 Chg-LLC CR2E083 (11/05)

City & State Sarasota, FL	City & State Sarasota, FL
Zip 34231	Country USA
Zip 34231	Country USA

4. FEI Number 20-2053783	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent MEDENDORP, STEVEN R. 104 SARASOTA QUAY SARASOTA, FL 34236	7. Name and Address of New Registered Agent Name: Steven Medendorp Street Address (P.O. Box Number is Not Acceptable): 1884 Stickney Point Rd City: Sarasota FL Zip Code: 34231
--	---


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: 2/9/06

Filing Fee is \$50.00 Due by May 1, 2006	Make check payable to Florida Department of State
---	--

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE: MGRM NAME: McNally, Scott STREET ADDRESS: 105 SARASOTA QUAY CITY-ST-ZIP: SARASOTA, FL 34236	<input type="checkbox"/> Delete	TITLE: MGRM NAME: McNally, Scott STREET ADDRESS: 1886 Stickney Point Rd CITY-ST-ZIP: Sarasota, FL 34231	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: MGRM NAME: McNally, Todd STREET ADDRESS: 105 SARASOTA QUAY CITY-ST-ZIP: SARASOTA, FL 34236	<input type="checkbox"/> Delete	TITLE: MGRM NAME: McNally, Todd STREET ADDRESS: 1884 Stickney Point Rd CITY-ST-ZIP: Sarasota, FL 34231	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: MGRM NAME: Stieneker, Stephen STREET ADDRESS: 105 SARASOTA QUAY CITY-ST-ZIP: SARASOTA, FL 34236	<input type="checkbox"/> Delete	TITLE: MGRM NAME: Stieneker, Stephen STREET ADDRESS: 1884 Stickney Point Rd CITY-ST-ZIP: Sarasota, FL 34231	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<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:	<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:	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  DATE: 2/9/06 (941) 308-1175

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