2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 30, 2006
Secretary of State

DOCUMENT# L05000013892

Entity Name: GREENE & LEE, PL

Current Principal Place of Business:

111 NORTH ORANGE AVE., SUITE 775
ORLANDO, FL 32801

New Principal Place of Business:

111 NORTH ORANGE AVE., SUITE 1450
ORLANDO, FL 32801

Current Mailing Address:

111 NORTH ORANGE AVE., SUITE 775
ORLANDO, FL 32801

New Mailing Address:

111 NORTH ORANGE AVE., SUITE 1450
ORLANDO, FL 32801

FEI Number: 13-4293716 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHARLES M. GREENE, P.A.
111 NORTH ORANGE AVE., SUITE 775
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

CHARLES M. GREENE, P.A.
111 NORTH ORANGE AVE., SUITE 1450
ORLANDO, FL 32801 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: CHARLES M. GREENE 01/30/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition
Name: GREENE, CHARLES M
Address: 111 N. ORANGE AVE., SUITE 1450
City-St-Zip: ORLANDO, FL 32801

Title: MGRM ( ) Change (X) Addition
Name: LEE, ROBERT Q
Address: 111 N. ORANGE AVE., SUITE 1450
City-St-Zip: ORLANDO, FL 32801

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: ROBERT Q. LEE MGRM 01/30/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date