## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000029556

Entity Name: TIDELAND IV, LLC

Name:

Address:

City-St-Zip:

KELLA, RANDALL R

9387 OCEAN HIGHWAY

PAWLEYS ISLAND, SC 29585

FILED May 04, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 9387 OCEAN HIGHWAY PAWLEYS ISLAND, SC 29585 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 3163 PAWLEYS ISLAND, SC 29585 FEI Number: 20-2557468 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ORNSTEIN, MARK L 2 SOUTH ORANGE AVENUE FIFTH FLOOR 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete PAGLIO, JOHN A Name: Name: Address: 9387 OCEAN HIGHWAY Address: City-St-Zip: PAWLEYS ISLAND, SC 29585 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: LOVE, RICHARD P JR Name: Address: 930 SOUTH HARBOR CITY BLVD., FOURTH FLOOR Address: City-St-Zip: MELBOURNE, FL 32901 City-St-Zip: Title: MGR () Delete Title: () Change () Addition PAGLIO, ROBERT G Name: Name: 9387 OCEAN HIGHWAY Address: Address: City-St-Zip: PAWLEYS ISLAND, SC 29585 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN A PAGLIO MGR 05/04/2006