2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000033098

Entity Name: MONTEMERE HOLDINGS, L.L.C.

FILED Apr 29, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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4427 SE 16TH PLACE, #2 923 DEL PRADO BLVD. #203 CAPE CORAL, FL 33990 CAPE CORAL, FL 33990

Current Mailing Address: New Mailing Address:

4427 SE 16TH PLACE, #2 923 DEL PRADO BLVD. #203 CAPE CORAL, FL 33990 CAPE CORAL, FL 33990

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WRIGHT, CHRISTINE F ESQ
4427 SE 16TH PLACE, #2
CAPE CORAL, FL 33904 US

COHEN & GRIGSBY, P.C.
27200 RIVERVIEW CENTER BLVD.
SUITE 309
BONITA SPRINGS, FL 34134 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: HUGH W. NEVIN, JR. 04/29/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: () Change (X) Addition LEIENDECKER, GUIDO Name: Name: Address: Address: 8843 TROPICAL COURT City-St-Zip: City-St-Zip: FORT MYERS, FL 33908 US Title: Title: MGR () Change (X) Addition () Delete LEIENDECKER, RUTH Name: Name: Address: Address: 8843 TROPICAL COURT City-St-Zip: City-St-Zip: FORT MYERS, FL 33908 US Title: () Delete Title: MGR () Change (X) Addition Name: FRY, RANDY A Name: 923 DEL PRADO BLVD., #203 Address: Address: City-St-Zip: City-St-Zip: CAPE CORAL, FL 33990 US () Change (X) Addition Title: () Delete Title: MGR FRY, CONNIÈ Name: Name: 923 DEL PRADO BLVD., #203 Address: Address: City-St-Zip: City-St-Zip: CAPE CORAL, FL 33990 US

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: RUTH LEIENDECKER MGR 04/29/2006