FROM : FAX NO. :8168661

FILED
Apr 14, 2006 8:00 am
Secretary of State
03-28-2006 90013 001 ****50.00

3/2

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

30005117

03042006 Chg-LLC CR2E083 (11/05)

DOCUMENT # L05000046025

1. Entity Name
SUOJANEN COMMERCIAL PROPERTIES - HUDSON, LLC

Principal Place of Business	Mailing Address
13128 S.R. 54 ODESSA, FL 33556	13128 S.R. 54 ODESSA, FL 33556
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 42-1670319 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WOLLINKA, DAVID J
2312 U.S. HIGHWAY 19
HOLIDAY, FL 34691

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 ______
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM SUOJANEN COMMERCIAL PROPERTIES, LLC 13128 S.R. 54 ODESSA, FL 33556	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

10. ADDITIONS/CHANGES

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: ______ 3/13/06 813 926-0707
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE DATE Daytime Phone #

(IRS USE ONLY) 575F 06-07-2005 SUOJ 0 0538159199 SS-4

ATTACHMENT
30005117
#L0500004602Z5

00758

Keep this part for your records. CP 575 F (Rev. 1-2005)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address. CP 575 F

0538159199

Your Telephone Number ( ) -

Best Time to Call

DATE OF THIS NOTICE: 06-07-2005
EMPLOYER IDENTIFICATION NUMBER: 42-1670319
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE
PHILADELPHIA PA 19255-0023

SUOJANEN COMMERCIAL PROPERTIES - HUDSON LLC
SUOJANON ERIK SINGLE MBR
13128 S R 54
ODESSA FL 33556