

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90043 003 ****55.00

DOCUMENT # L05000052644

1. Entity Name
LUPA ASSOCIATES LLC



Principal Place of Business
611 HUDSON BAY DRIVE
PALM BEACH GARDENS, FL 33410 US

Mailing Address
611 HUDSON BAY DRIVE
PALM BEACH GARDENS, FL 33410 US

40043343



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01092006 Chg-LLC CR2E083 (11/05)

4. FEI Number

03-0565018

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COLARDI, RONALD
611 HUDSON BAY DRIVE
PALM BEACH GARDENS, FL 33410

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

10. ADDITIONS/CHANGES

TITLE MGRM ☐ Delete
NAME COLARDI, RONALD
STREET ADDRESS 611 HUDSON BAY DRIVE
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☐ Delete
NAME WALSH, JOHN
STREET ADDRESS 5101 MAGNOLIA BAY CIRCLE
CITY-ST-ZIP PALM BEACH GARDENS, FL 33418

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME WALSH, PATTI
STREET ADDRESS 5101 MAGNOLIA BAY CIRCLE
CITY-ST-ZIP PALM BEACH GARDENS, FL 33418

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME COLARDI, LUCY
STREET ADDRESS 611 HUDSON BAY DRIVE
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Ronald Colardi*

4-10-2006

561-799-3895

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

Date

Daytime Phone #