## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Mar 22, 2006 8:00 am Secretary of State DOCUMENT #L05000061264 03-22-2006 90289 020 \*\*\*\*50.00 D. M. MCNAMARA PROPERTIES, LLC Principal Place of Business Mailing Address 150 MAGNOLIA AVENUE 150 MAGNOLIA AVENUE DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01262006 CR2E083 (11/05) Chg-LLC City & State City & State 4. FEI Number Applied For Not Applicable 20-3050161 Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agont 7. Name and Address of New Registered Agent PALMETTO CHARTER SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 150 MAGNOLIA AVENUE DAYTONA BEACH, FL: 32114 City 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) Filing Fee is \$50.00 Make check payable to Due by May 1, 2006 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. TITLE MGR ☐ Delete TITLE ☐ Change ☐ Addition MCNAMARA, DONALD M STREET ADDRESS 30 GREEN SPRINGS DRIVE STREET ADDRESS CITY-ST-ZIP MADISON, CT 06443 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete □ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ٠. TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is roe 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. DONALD M.MCNAMARA

JRE: Wast Min Ward Managing Member, Manager, or authorized representative

**FILED** 

Thomas T. Cobb (1916-2004)

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March 20, 2006

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Florida Department of State Division of Corporations P.O. Box 6478 Tallahassee, Florida 32314

Re: D.M. McNamara Properties, LLC

Dear Sir or Madam:

Enclosed is the Annual Report for the above referenced corporation together with check number 4961 by Donald M. McNamara payable to the Department of State in the amount of \$50.00 to cover the filing fee.

Sincerely,

Lorraine J. McLaughlin

Certified Paralegal Direct Dial (386) 323-9274

Email Lorraine.McLaughlin@CobbCole.com

Telecopier (386) 238-7003

/ljm enclosures