

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

2/ **FILED**  
**Mar 13, 2006 8:00 am**  
**Secretary of State**

02-16-2006 90141 042 \*\*\*\*50.00

<b>DOCUMENT # L05000062969</b>					
<b>1. Entity Name</b> MDG DOWNTOWN PARTNERS, LLC					
<b>Principal Place of Business</b> 3200 TAMiami TRAIL NORTH, SUITE 200 NAPLES, FL 34103			<b>Mailing Address</b> 3200 TAMiami TRAIL NORTH, SUITE 200 NAPLES, FL 34103		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 20-3049739	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$5.00 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  LADEMAN, CARRIE E 3200 TAMiami TRAIL NORTH, SUITE 200 NAPLES, FL 34103			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City		
FL			Zip Code		
<b>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.</b>					
<b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when reissuing)					
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WOODWARD, MARK J 3200 TAMiami TRAIL NORTH, SUITE 200 NAPLES, FL 34103	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KLOHN, WILLIAM L 2180 IMMOKALEE ROAD, STE 309 NAPLES, FL 34110	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KLOHN, WILLIAM L 2180 IMMOKALEE ROAD, STE 309 NAPLES, FL 34110	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KLOHN, WILLIAM L 2180 IMMOKALEE ROAD, STE 309 NAPLES, FL 34110	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KLOHN, WILLIAM L 2180 IMMOKALEE ROAD, STE 309 NAPLES, FL 34110	<input type="checkbox"/> Delete			
<b>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.</b>					
<b>SIGNATURE:</b> _____ <i>Mark J. Woodward</i> <b>1/18/06 (239)649-6555</b>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					



ATTACHMENT  
30002314

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 20, 2006

MDG DOWNTOWN PARTNERS, LLC  
3200 TAMiami TRAIL NORTH, SUITE 200  
NAPLES, FL 34103

Subject: MDG DOWNTOWN PARTNERS, LLC

Reference Number: L05000062969

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/MH  
ANNUAL REPORTS SECTION