2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Feb 03, 2006 08:00 AM **Secretary of State** DOCUMENT # L05000066545 1. Entity Name GRAYHAWK MANATEE, LLC Malling Address Principal Place of Business 2033 MAIN ST. STE. 600 SARASOTA, FL 34237 2033 MAIN ST. STE. 600 SARASOTA, FL 34237 01262006 No Cho-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3933524 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MYERS, TROY H JR. DO NOT WRITE 2033 MAIN ST. STE. 600 SARASOTA, FL 34237 IN THIS SPACE 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. Lam familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title it applicable. (NOTE, Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS TITLE MGR MYERS, TROY H JR NAME STREET ADDRESS 2033 MAIN ST. STE. 600 SARASOTA, FL 34237 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 7/71 E NAME STREET ADDRESS CITY-ST-ZIP TITLE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes ! 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:/ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR

NAME STREET ADDRESS CITY-ST-ZIP

FILED