

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jun 07, 2006 8:00 am
Secretary of State

05-04-2006 90174 001 ***150.00

DOCUMENT # L05000068701 1. Entity Name CASTINE PROPERTIES, LLC			
Principal Place of Business 8211 WEST BROWARD BOULEVARD, SUITE 230 PLANTATION, FL 33324		Mailing Address 8211 WEST BROWARD BOULEVARD, SUITE 230 PLANTATION, FL 33324	
2. Mailing Address 8211 W. Broward Blvd. PH2 Plantation, FL 33324		3. Mailing Address 8211 W. Broward Blvd. PH2 Plantation, FL 33324	
4. FEI Number 20-4072710		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent THERREL BAISDEN, P.A. SUNTRUST INTERNATIONAL CENTER ONE S.E. 3RD AVENUE, SUITE 2400 MIAMI, FL 33131		7. Name and Address of New Registered Agent No 8211 W. Broward Blvd. St PH2 City Plantation, FL 33324 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 _____ (NOTE: Registered Agent signature required when reappointing) _____ 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 NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition
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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: <u>Peter C. Gardner</u>		Date <u>4-2006</u> Daytime Phone # <u>954-727-9335</u>	

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4. FEI Number **20-4072710** 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

THERREL BAISDEN, P.A.
SUNTRUST INTERNATIONAL CENTER
ONE S.E. 3RD AVENUE, SUITE 2400
MIAMI, FL 33131

No **8211 W. Broward Blvd.**
St **PH2**
City **Plantation, FL 33324**
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 reappointing)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

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10. ADDITIONS/CHANGES

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☐ Change ☒ Addition

**V. P.
PETER C. GARDNER
8211 W. BROWARD BLVD PH2
PLANTATION FL 33324**

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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SIGNATURE:

Peter C. Gardner

4-2006

954-727-9335

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

Date

Daytime Phone #