

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000072876

Entity Name: CCH, LLC

FILED
Jan 07, 2006
Secretary of State

Current Principal Place of Business:

1510 OAK WAY, STE 200
SARASOTA, FL 34232

New Principal Place of Business:

1510 OAK WAY
SUITE 200
SARASOTA, FL 34232

Current Mailing Address:

1510 OAK WAY, STE 200
SARASOTA, FL 34232

New Mailing Address:

1510 OAK WAY
SUITE 200
SARASOTA, FL 34232

FEI Number: 20-3155158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARRIMAN, THOMAS
1510 OAK WAY, SUITE 200
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

HARRIMAN, THOMAS
1510 OAK WAY
SUITE 200
SARASOTA, FL 34232 US

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.

SIGNATURE: THOMAS HARRIMAN

01/07/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HARRIMAN, THOMAS
Address: 1510 OAK WAY, STE 200
City-St-Zip: SARASOTA, FL 34232

Title: MGRM () Delete
Name: HARRIMAN, LISA
Address: 1510 OAK WAY, STE 200
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: LISA HARRIMAN

MGRM

01/07/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date