2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000076488

Current Principal Place of Rusiness:

Entity Name: HARBOR SQUARE OUTPARCEL, LLC

FILED Jan 15, 2006 Secretary of State

Date

() Change () Addition

| Ourient i inicipal i lace | or Business. | ivew i inicipal i lace e | n Business. |
|-------------------------------------------------------------------|---------------------------------|-------------------------------------------|-------------------------------------|
| 14361 B HARBOR LINKS FT MYERS, FL 33908 | | | |
| Current Mailing Address: | | New Mailing Address: | |
| 14361 B HARBOR LINKS FT MYERS, FL 33908 | | | |
| FEI Number: | FEI Number Applied For (X) | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | Name and Address of New Registered Agent: | |
| SNIBBE, ROBERT M III 4017 CHURCH CREEK F LARGO, FL 33774 US | | | |
| The above named entity s in the State of Florida. | ubmits this statement for the p | urpose of changing its registered | office or registered agent, or both |
| SIGNATURE: | | | |

New Principal Place of Rusiness:

MANAGING MEMBERS/MANAGERS:

() Delete

Electronic Signature of Registered Agent

LARSON, GLORIA M Name: 14361 B HARBOR LINKS COURT Address: FT. MYERS, FL 33908 US City-St-Zip:

Title: Name:

Address: City-St-Zip:

ADDITIONS/CHANGES:

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: GLORIA M LARSON 01/15/2006