# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Jan 18, 2006**
**Secretary of State**

DOCUMENT# L05000077811

**Entity Name:** ST. LUCIE COMMERCIAL HOLDINGS LLC

**Current Principal Place of Business:**

4000 PONCE DE LEON BLVD. SUITE 400
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

4000 PONCE DE LEON BLVD. SUITE 400
CORAL GABLES, FL 33146

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CONTRERAS, GILBERT A ESQ
4000 PONCE DE LEON BLVD. SUITE 400
CORAL GABLES, FL 33146 US

**Name and Address of New Registered Agent:**

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: ______________________________
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition
Name: CONTRERAS, GILBERT A
Address: 4000 PONCE DE LEON BLVD, SUITE 400
City-St-Zip: CORAL GABLES, FL 33146

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: GILBERT CONTRERAS MGR 01/18/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date