


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jul 25, 2006 8:00 am**  
**Secretary of State**

07-25-2006 90083 018 \*\*\*\*50.00

<b>DOCUMENT # L05000078574</b>	
1. Entity Name NEW PORT - TAMPA BAY INVESTORS, LLC	

Principal Place of Business C/O FOLEY & LARDNER//ATTN: R.J. WOLFE 100 N. TAMPA STREET, SUITE 2700 TAMPA, FL 33602	Mailing Address C/O FOLEY & LARDNER//ATTN: R.J. WOLFE 100 N. TAMPA STREET, SUITE 2700 TAMPA, FL 33602
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**20050333**



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

07132006 Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3296590	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desires <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
F AND L CORP. ONE INDEPENDENT DRIVE, SUITE 1300 JACKSONVILLE, FL 32202		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code

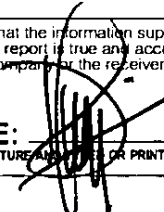
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$50.00 Due by September 6, 2006</b>	<b>Make check payable to Florida Department of State</b>
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Melissa W. Steadman 3401 Mullen Avenue Tampa, Florida 33609-4631 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Donald J. Niederpruem 100 N. Tampa Street, Suite 1925 Tampa, Florida 33602 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR W. Andrew Krusen, Jr. 712 S. Oregon Avenue, Suite 200 Tampa, Florida 33606 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Stephen D. Moynihan 2401 PGA Boulevard, Suite 182 Palm Beach Gardens, Florida 33410 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

<b>SIGNATURE:</b> 	Donald J. Niederpruem, Manager	Date: 7/19/2006	Daytime Phone #
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ATTACHMENT  
20050333  
#105000018574  
July 19, 2006

**ATTORNEYS AT LAW**

100 NORTH TAMPA STREET, SUITE 2700  
TAMPA, FL 33602-5810  
P.O. BOX 3391  
TAMPA, FL 33601-3391  
813.229.2300 TEL  
813.221.4210 FAX  
www.foley.com

WRITER'S DIRECT LINE  
813.225.4191  
krussell@foley.com EMAIL

CLIENT/MATTER NUMBER  
303099-0128

**CERTIFIED MAIL  
RETURN RECEIPT REQUESTED**

Florida Department of State  
Division of Corporations  
P.O. Box 6478  
Tallahassee, Florida 32314

**Certified Article Number**

**7160 3901 9849 3565 2682**

**SENDERS RECORD**

Re: New Port – Tampa Bay Investors, LLC

Dear Madam or Sir:

Enclosed is the 2006 Limited Liability Company Annual Report for the above-referenced entity. Also enclosed is our client's check in the amount of \$50.00 made payable to the *Florida Department of State* in payment of the filing fees.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Katherine Russell  
Paralegal

Enclosures

BOSTON  
BRUSSELS  
CHICAGO  
DETROIT  
JACKSONVILLE

LOS ANGELES  
MADISON  
MILWAUKEE  
NEW YORK  
ORLANDO

SACRAMENTO  
SAN DIEGO  
SAN DIEGO/DEL MAR  
SAN FRANCISCO  
SILICON VALLEY

TALLAHASSEE  
TAMPA  
TOKYO  
WASHINGTON, D.C.

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