

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-10-2006 90037 022 ****50.00

DOCUMENT # L05000089030 1. Entity Name COLENAT ENTERPRISES, LLC					
Principal Place of Business 515 EAST PARK AVENUE TALLAHASSEE, FL 32301			Mailing Address 515 EAST PARK AVENUE TALLAHASSEE, FL 32301		
2. Principal Place of Business 1800 MARINA Circle Suite, Apt. #, etc.		3. Mailing Address 1800 MARINA Circle Suite, Apt. #, etc.			
City & State North Ft Myers FL		City & State North Ft Myers FL			
Zip 33903		Country USA		4. FEI Number 56-2533776	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent KELLY, DANIEL 1800 MARINA CIR. N. FT. MYERS, FL 33903			7. Name and Address of New Registered Agent 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 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	MGR LINDER, CARL H TRUSTEE 515 EAST PARK AVENUE TALLAHASSEE, FL 32301	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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.					
SIGNATURE: _____			Date 4/21/06 239 229 7019		

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