2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT #L05000101848

CENTRAL 22ND LLC.

FILED Jan 18, 2007 08:00 AM **Secretary of State**

Principal Place of Business

405 NORTH REO ST

SUITE 200

TAMPA, FL 33609 US

Mailing Address

405 NORTH REO ST SUITE 200

TAMPA, FL 33609 US



01052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3664666

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

GOLDBERG, GLENN ESQ. 133 FIRST STREET NORTH

ST. PETERSBURG, FL 33701

DO NOT WRITE IN THIS SPACE

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.

Signature, typed or printed name of registered agent and title if applicable

(NOTE, Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

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9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PAVONETTI, NICHOLAS 876 ROSER PARK DRIVE SOUTH SAINT PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGRM BAUMANN, JOHN 405 NORTH REO ST., SUITE 200 TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGRM FUDGE, FELIX D 944 4TH ST. N., SUITE 800 SAINT PETERSBURG, FL 33701
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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 previous or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

BIGNATURE AND TYPED OR PRINTED NAME OF NG MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE