## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000102908

Address:

City-St-Zip:

11341 DURHAM STREET

PARRISH, FL 34219

Entity Name: FLORIDA LOGISTICAL ACQUISITIONS GROUP, LLC

FILED Apr 24, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 11314 DURHAM STREET PARRISH, FL 34219 **Current Mailing Address: New Mailing Address:** 11314 DURHAM STREET PARRISH, FL 34219 FEI Number: 20-3709338 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SABLOWSKI, MANFRED K 11314 DURHAM STREET PARRISH, FL 34219 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SABLOWSKI, MANFRED K Name: Name: 11314 DURHAM STREET Address: Address: PARRISH, FL 34219 City-St-Zip: City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: PATTEN, IZAAK D Name: Address: 12802 PACIFICA PLACE Address: City-St-Zip: TAMPA, FL 33625 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition SCHOJAN, JOSEPH P STILES, JEFFREY R Name: Name: Address: 5610 31ST COURT EAST Address: 11341 DURHAM STREET City-St-Zip: ELLENTON, FL 34222 City-St-Zip: PARRISH, FL 34219 Title: MGRM ( ) Delete Title: () Change () Addition Name: STILES, WILLIAM S Name: 8153 CANDLEWOODE DRIVE Address: Address: City-St-Zip: LARGO, FL 33773 City-St-Zip: Title: Title: MGRM (X) Delete () Change () Addition STILES, JEFFREY R Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: MANFRED SABLOWSKI MGRM 04/24/2006