

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

04-10-2006 90047 011 ****50.00

DOCUMENT # L05000104790				
1. Entity Name MELLON HOLDING, LLC				
Principal Place of Business 8210 LAKEWOOD RANCH BOULEVARD BRADENTON, FL 34242 US		Mailing Address 8210 LAKEWOOD RANCH BOULEVARD BRADENTON, FL 34242 US		
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State		City & State		
Zip	Country	Zip	Country	
4. FEI Number		03222006 Chg-LLC CR2E083 (11/05) ☒ Applied For ☐ Not Applicable		
5. Certificate of Status Desired		☐ \$5.00 Additional Fee Required ☒		
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent		
PFLUGNER, J GOEFFREY 2033 MAIN STREET SUITE 600 SARASOTA, FL 34237		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 registering) 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 ☐ Delete	MGRM SCHIER, JAMES 8210 LAKEWOOD RANCH BOULEVARD BRADENTON, FL 34242	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	MGR ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☒ Addition	MGRM PATRICK K NEAL Trustee ☒ Change ☐ Addition 8210 Lakewood Ranch Blvd Bradenton FL 34202	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☒ Addition	S PRISCILLA G HEIM ☒ Change ☐ Addition 8210 Lakewood Ranch Blvd Bradenton FL 34202	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete		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: <u>Priscilla G Heim</u>		3-22-06 9413281034		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #		

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