


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90205 042 ****50.00

DOCUMENT # L05000105133					
1. Entity Name GRANDRIC, LLC					
Principal Place of Business 2033 MAIN STREET SUITE 600 SARASOTA, FL 34237			Mailing Address 2033 MAIN STREET SUITE 600 SARASOTA, FL 34237		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-4361129	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MYERS, TROY H JR 2033 MAIN STREET SUITE 600 SARASOTA, FL 34237			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 reinstating) 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 MYERS, TROY H JR 2033 MAIN STREET, SUITE 600 SARASOTA, FL 34237	<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"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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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"/> 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.					
SIGNATURE: <i>Troy H. Myers, Jr.</i> TROY H. MYERS, JR. as Manager 2/23/2006 941/953-8110					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

ATTACHMENT

ICARD, MERRILL, CULLIS, TIMM

FUREN & GINSBURG, P.A.

ATTORNEYS AND COUNSELORS

2033 MAIN STREET, SUITE 600

SARASOTA, FLORIDA 34237

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TROY H. MYERS, JR.

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REPLY TO:

P.O. BOX 4195

SARASOTA, FLORIDA 34230

20013509
#605000105133

February 23, 2006

Division of Corporations

P.O. Box 6198

Tallahassee, FL 32314

Re: 2006 Annual Reports Due May 1, 2006

Dear Sir/Madam:

Enclosed please find for filing LLC Annual Reports due May 1, 2006, without changes. Attached to each report is a check in the amount of \$50.00 to cover the filing fee.

Should you have any questions or comments concerning the foregoing, please do not hesitate to contact me.

Respectfully,

ICARD MERRILL CULLIS TIMM

FUREN & GINSBURG, P.A.



Mandy R. Facciolla

Legal Secretary to Troy H. Myers, Jr.

Enclosures /1/