

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 20, 2006 8:00 am
Secretary of State

01-20-2006 90048 044 ****55.00

DOCUMENT # L05000109204

1. Entity Name
URBAN TECHNICS LLC



Principal Place of Business
**1360 SE 21ST STREET
OKEECHOBEE, FL 34974-2409**

Mailing Address
**1360 SE 21ST STREET
OKEECHOBEE, FL 34974-2409**

40003857



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01162006 Chg-LLC CR2E083 (11/05)

4. FEI Number

20-2048150

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**AGENTA AND CORPORATIONS, INC.
SUITE E, 773 4TH AVENUE NORTH
NAPLES, FL 34102**

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

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

(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

TITLE **MGR** ☒ Delete
NAME **CHAMBERLAIN, JOHN RICHARD B**
STREET ADDRESS **1360 SE 21ST STREET**
CITY-ST-ZIP **OKEECHOBEE, FL 349742409**

TITLE ☐ Delete
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TITLE ☐ Delete
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CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGR** ☒ Change ☐ Addition
NAME **CHAMBERLAIN, JOHN RICHARD B**
STREET ADDRESS **1360 SE 21ST STREET**
CITY-ST-ZIP **OKEECHOBEE, FL 34974-2409**

TITLE ☐ Change ☐ Addition
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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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

JOHN R. B. CHAMBERLAIN

Date

1-16-06 772-475-5290

Daytime Phone #