

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000113789

**FILED**  
**Feb 10, 2006**  
**Secretary of State**

**Entity Name:** ATR FAMILY EQUITIES, LLC

**Current Principal Place of Business:**

475 CENTRAL AVENUE, SUITE 202  
THE KRESS BUILDING  
ST. PETERSBURG, FL 33701

**New Principal Place of Business:**

**Current Mailing Address:**

475 CENTRAL AVENUE, SUITE 202  
THE KRESS BUILDING  
ST. PETERSBURG, FL 33701

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MASCARA, ERNEST L  
475 CENTRAL AVENUE, SUITE 202  
THE KRESS BUILDING  
ST. PETERSBURG, FL 33701 US

**Name and Address of New Registered Agent:**

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:**

Title: MGR ( ) Delete  
Name: RIMAR, ALLAIN T  
Address: 475 CENTRAL AVENUE, SUITE 202  
City-St-Zip: ST. PETERSBURG, FL 33701

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: ALLAIN T. RIMAR

MGR

02/10/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date