2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 08, 2006
Secretary of State

DOCUMENT# L05000114178

Entity Name: CATALINA CENTER, L.L.C.

Current Principal Place of Business:

4735 SANTA BARBARA BLVD
NAPLES, FL 34104 US

New Principal Place of Business:

4735 SANTA BARBARA BLVD
SUITES 1 AND 2
NAPLES, FL 34104 US

Current Mailing Address:

4735 SANTA BARBARA BLVD
NAPLES, FL 34104 US

New Mailing Address:

4735 SANTA BARBARA BLVD
SUITES 1 AND 2
NAPLES, FL 34104 US

FEI Number: 59-3457461 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SISCO, JEANETTE L
6634 CRAVEN HILL WAY
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

SISCO, JEANETTE L DVM
6634 CRAVEN HILL WAY
NAPLES, FL 34104 US

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: JEANETTE L. SISCO, DVM 07/08/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SISCO, JEANETTE L
Address: 6634 CRAVEN HILL WAY
City-St-Zip: NAPLES, FL 34104 US

ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition
Name: SISCO, JEANETTE L DVM
Address: 6634 CRAVEN HILL WAY
City-St-Zip: NAPLES, FL 34104 US

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: JEANETTE L. SISCO, DVM PRES 07/08/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date