

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 23, 2006 8:00 am**  
**Secretary of State**

03-23-2006 90259 001 \*\*\*\*55.00

20015500



02142006 Chg-LLC CR2E083 (11/05)

4. FEI Number **20-3980936** Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$5.00** Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

ROSENTHAL, TERRY H  
12031 TOSCANA WAY  
UNIT 201  
BONITA SPRINGS, FL 34135

## 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  
NAME: ROSENTHAL, TERRY H ☐ Delete  
STREET ADDRESS: 12031 TOSCANA WAY, UNIT 201  
CITY-ST-ZIP: BONITA SPRINGS, FL 34135

TITLE: ☐ Delete  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

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TITLE: ☐ Delete  
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CITY-ST-ZIP:

## 10. ADDITIONS/CHANGES

TITLE: ☐ Change ☐ Addition

NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

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STREET ADDRESS:  
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

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]*

3/15/06

732-616-9553

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

Date

Daytime Phone #