2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2006
Secretary of State

DOCUMENT# L05000116206

Entity Name: NORTHWEST FLORIDA PARKING LLC

Current Principal Place of Business:

1999 W. DETROIT BLVD.
PENSACOLA, FL 32534

New Principal Place of Business:

Current Mailing Address:

1999 W. DETROIT BLVD.
PENSACOLA, FL 32534

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:

COMIS, SHAWN L
1999 W. DETROIT BLVD
PENSACOLA, FL FL 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: COMIS, SHAWN L
Address: 1999 W. DETROIT BLVD.
City-St-Zip: PENSACOLA, FL 32534

Title: MGR ( ) Delete
Name: COMIS, HERBERT L
Address: 1999 W. DETROIT BLVD
City-St-Zip: PENSACOLA, FL 32534

Title: MGR ( ) Delete
Name: COMIS, TABITHA L
Address: 1999 W. DETROIT BLVD
City-St-Zip: PENSACOLA, FL 32534

ADDITIONS/CHANGES:

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

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

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: SHAWN COMIS MGR 04/12/2006

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