

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000119016

Entity Name: CNA PROPERTIES, LLC

FILED  
Feb 28, 2006  
Secretary of State

**Current Principal Place of Business:**

1001 37TH STREET NORTH, SUITE D  
ST. PETERSBURG, FL 33713

**New Principal Place of Business:**

1001 37TH STREET NORTH  
SUITE D  
ST. PETERSBURG, FL 33713 US

**Current Mailing Address:**

1001 37TH STREET NORTH, SUITE D  
ST. PETERSBURG, FL 33713

**New Mailing Address:**

1001 37TH STREET NORTH  
SUITE D  
ST. PETERSBURG, FL 33713 US

FEI Number: 20-4114698

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COHRS, DENIS A  
2575 ULMERTON ROAD, SUITE 210  
CLEARWATER, FL 33762 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MR ( ) Change (X) Addition  
Name: CHIOCCARIELLO, CARMINE J  
Address: 2722 HERON PL  
City-St-Zip: CLEARWATER, FL 33762

Title: DR. ( ) Change (X) Addition  
Name: SHOOPAK, ALAN  
Address: 14564 EAGLE PT DRIVE  
City-St-Zip: CLEARWATER, FL 33762

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: CARMINE J. CHIOCCARIELLO

MR.

02/28/2006

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