




FILED
Aug 08, 2008 8:00 am
Secretary of State

08-08-2008 90034 033 ***138.75

2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L06000120241			
1. Entity Name 606 HOLDINGS, LLC			
Principal Place of Business 305 N FT HARRISON AVE CLEARWATER, FL 33755		Mailing Address 305 N FT HARRISON AVE CLEARWATER, FL 33755	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
03182008 Chg-LLC CR2E083 (12/08)		4. FEI Number 20-8259626	
		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
KUGLER, BENJAMIN 305 N FT HARRISON AVE CLEARWATER, FL 33755		Name Philip M Jepsen Street Address (P.O. Box Number is Not Acceptable) 305 N. FT HARRISON AVE City CLEARWATER FL Zip Code 33755	
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 		DATE	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TRIANGLE DEVELOPMENT COMPANY LLC 305 N FT HARRISON AVE CLEARWATER, FL 33755 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Ronald Pollack 305 N Ft Harrison Ave Clearwater, FL 33755 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: 		4/22/08 7272241832	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	



ATTACHMENT

50009214

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 6, 2008

606 HOLDINGS, LLC
305 N FT HARRISON AVE
CLEARWATER, FL 33755

Subject: 606 HOLDINGS, LLC

Reference Number: L06000120241

Please be advised, we have received your annual report/uniform business report; however, the report has not been filed and a copy is being returned for the following correction(s):

The fee to file the enclosed limited liability company annual report is \$138.75. If a certificate of status is desired, please add an additional \$5.00.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 6478, TALLAHASSEE, FLORIDA 32314 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/tc
ANNUAL REPORTS SECTION

8/05/08 Spoke to Agnes
at DIV of CORP. She said
to pay the \$138.75 and
that will settle it.
No \$400 late fee will
be charged.

RT
Richard
Tinberg