2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Feb 09, 2006 08:00 AM DOCUMENT # L96000001094 **Secretary of State** 1. Entity Name KANDECK PROPERTIES, L.C. Mailing Address Principal Place of Business 526 STOCKTON ST 526 STOCKTON ST. JACKSONVILLE, FL 32204 JACKSONVILLE, FL 32204 01132006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 59-3438674 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent COLD, KATHLEEN H DO NOT WRITE ONE INDEPENDENT DRIVE **SUITE 2301** IN THIS SPACE JACKSONVILLE, FL 32202 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. (NOTE, Repistered Agent algosium required when retretating) DA75 Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS MGR TIBLE KANTOR, STANLEY NAME STREET ADDRESS 2523 EDISON AVE CITY-ST-ZIP JACKSONVILLE, FL 32204 U000000427614 MGR BBE 02/21/06-80014-010 50.00 PAINTER, ROGER W STREET ADORESS 528 STOCKTON STREET JACKSONVILLE, FL 32204 CHY-ST-ZP NAME STREET ADDRESS DO NOT WRITE อาห-รา-อค IN THIS SPACE TITLE MAINE STREET ADDRESS CITY-ST-ZP BILLE NAME: STREET ADDRESS

11. I hereby certify that the information supplied with this fiting 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 cath; 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: (D. G. (N) 1 Q. (L) KUGER W PA
SIGNATURE AND TYPED OR PRINTED HAVE OF SKINING MANAGING MEMORY, OR AUTHORIZED REPRESENTATIVE

CATY-57-27

NAME STREET ADDRESS CITY-ST-ZIP

ROGER W PAINTER, MANAGER 2/8/2006 (904) 388-2696

FILED