## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L98000000057

Entity Name

MANATEE SITE DEVELOPMENT, L.C.



FILED Apr 12, 2006 08:00 AM Secretary of State

Principal Place of Business

880 33RD STREET EAST

PALMETTO, FL 34221

Mailing Address

P.O. BOX 31 PARRISH, FL 34219



01052006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0822623 Applied For Not Applicable

5. Certificate of Status Desired

X

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

ROBINSON, LAYON F II, PA 442 OLD MAIN ST. BRADENTON, FL 34205

## DO NOT WRITE

6. The above named entity submits this statement for the purpose of changing its registered office or r	registered agent, or both, in the State of Florida.	l am tamiliar 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

000000505405 04/26/06-80115-010 55.00

9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-57-21P	MGRM PRESHA, WALTER L 880 33RD STREET EAST PALMETTO, FL 34221		
TITLE NAME STREET ADDRESS GITY-ST-ZIP	MGRM ROZIER, TRINA 880 33RD STREET EAST PALMETTO, FL 34221		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
DITLE MAME STREET ADDRESS CITY-SI-ZIP			
TITLE NAME STREET ADDRESS CHY-ST-ZIP			
TITLE			

## DO NOT WRITE IN THIS SPACE

11. I hereby certify that the Information supplied with this filling 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 path; 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:

MAME STREET ADDRESS CITY-ST-ZIP

won

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

4-7-06 941 704538

Date

Daytime Phone #