2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L99000002512

ADH PARK AVENUE INVESTMENTS, LLC



Principal Place of Business 784 BLANDING BLVD STE 100 ORANGE PARK, FL 32065		Mailing Address 784 BLANDING BLVD STE 100 ORANGE PARK, FL 32065			20025		3 1 81181 11818 141		
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01252006	Chg-LLC	CR2E0	83 (11/05)		
City & State		City & State			4. FEI Number 59-357			_ 	oplied For
Zip	Country	Zip	Zip Country		5. Certificate	of Status Desired		\$5.00 Add	ditional d
	6. Name and Address of Current I	Registered Agent			7. Name and	Address of New F	legistered A	gent	
				ame					
1279 KINC STE 117	S, GRADY H JR SSLEY AVENUE	Street Addres		reet Address (s (P.O. Box Number is Not Acceptable)				
ORANGE	PARK, FL 32073	City		ity		·	FL	Zip Code	е
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. am familiar with, and accepted the obligations of registered agent.									and accept
	3 3								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
		(10)		1 ogneto e requies	T		- DATE		
Filing Fee is \$50.00 Due by May 1, 2006							e check pa a Departme		8
9.	MANAGING MEMBE	RS/MANAGERS	10.			ADDITIONS	/CHANGES		
TITLE	MGR	☐ Delete	TITLE			, , .		Change	Addition
NAME	ABSHIRE, KYLE D		NAME						
STREET ADDRESS	784 BLANDING BLVD STE 100		STREET ADD	oress					
CITY-ST-ZIP	ORANGE PARK, FL 32065		CITY-ST-ZI	IP .					
THTLE		☐ Delete	TITLE					Change	☐ Addition
NAME			NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADD						
			CITY-ST-Z	P					
TITLE		☐ Delete	TITLE					Change	Addition
NAME STREET ADDRESS			NAME STREET ADD	NDF CC					
CITY-ST-ZIP			CITY-ST-ZI	l.					
				<u>" </u>					
TITLE NAME		☐ Delete	TITLE NAME					☐ Change	☐ Addition
STREET ADDRESS			STREET ADD	nress					
CITY-ST-ZIP			CITY-ST-ZI	l l					
TITLE		☐ Delete	TITLE					Change	Addition
NAME		Bolicio	NAME	Ì				L_J onlingo	
STREET ADDRESS			STREET ADD	DRESS					
City-St-Zip			CITY-ST-ZI	li i					
TITLE		☐ Delete	TITLE					☐ Change	Addition
NAME			NAME						
STREET ADDRESS			STREET ADD	DRESS					

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.

CITY-ST-ZIP

CITY-ST-ZIP

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

3/31/06

FILED

Apr 05, 2006 8:00 am Secretary of State

04-05-2006 90018 020 ****50.00

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Daytime Phone #