## 2006 LIMITED LIABILITY COMPANY

**FILED** 

ANNUAL REPORT				May 01, 2006 08:00	
DOCUMENT # L9900007799  1. Entity Name LARGO COMMERCE GP, LLC				May 01, 2006 08:00 Secretary of Stat	
Principal Plac 8000 TOWER VIENNA, VA	RS CRESCENT DR #825	Mailing Address 8000 TOWERS CRESCENT DR VIENNA, VA 22182	#825		
D	O NOT WRITI	E IN THIS SPA	CE	04272006 No Chg-LLC CR2E083 (11/05)  4. FEI Number Applied For S9-3615757 Not Applied For Not Applied For S9-3615757 S. Certificate of Status Desired □ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MYERS, W. PARKINSON 15436 NORTH FLORIDA AVENUE, SUITE 101 TAMPA, FL 33613				DO NOT WRITE IN THIS SPACE	
the obligati	named entity submits this statement ons of registered agent.  Signature, typed or printed name of registered agent  ling Fee is \$50.00  Le by May 1, 2006		ed affice ar register od Agent signature required	ed agent, or both, in the State of Florida. I am familiar with, and accept when reliability)  DATE	
9.	MANAGING MEME	FRS/MANAGERS			
NAME STREET ADDRESS CITY-ST-ZIP INTLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CORO INVESTMENTS LLC 8000 TOWERS CRESCENT DE VIENNA, VA 22182		U00000549980 05/13/06-80044-002 50.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					
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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 eath; 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.

NAME STREET ADDRESS CRY-ST-ZIP

04/18/06 > MANAGER SIGNATURE: STRUCTURE AND TYPED ON PRINTED NAME OF RIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE