


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90148 032 ****50.00

DOCUMENT # M00000002355

1. Entity Name
 NEW PORT RICHEY INVESTORS, LLC



Principal Place of Business
 QUALITY INN + SUITES
 5316 U.S. HWY. 19 N
 NEW PORT RICHEY, FL 34652

Mailing Address
 C/O RAICHE & COMPANY
 680 CENTRAL AVENUE
 DOVER, NH 03820

DO NOT WRITE IN THIS SPACE



01052006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 02-0521633	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

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM RAICHE, LAWRENCE R CPA 680 CENTRAL AVE. DOVER, NH 03820
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM KT INVESTMENTS, LLC 300 WOODBURY AVENUE PORTSMOUTH, NH 03801
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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 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: Lawrence R Raiche LAWRENCE RAICHE Date: 1/25/06 Daytime Phone #: 603-742-8894

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