## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Feb 03, 2006 08:00 AM DOCUMENT # M04000000763 **Secretary of State** 1. Entity Name ALMERNIC, LLC Principal Piece of Business Mailing Address 250 JUNGLE ROAD 250 JUNGLE ROAD C/O ALICE HANLEY C/O ALICE HANLEY PALM BEACH, FL 33480 PALM BEACH, FL 33480 01162006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 47-1618903 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CIT CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGR TITLE HANLEY, ALICE H NAME STREET ADDRESS 250 JUNGLE ROAD CITY-ST-ZIP PALM BEACH, FL 33480 TITLE 100000418295 02/14/06-80001-019 50.00 MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-73P TITLE NAME

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 508, Florida Statutes.

SIGNATURE:X Cily H Hance

STREET ADDRESS
CHT-ST-ZIP
TITLE
NAME
STREET ADDRESS
CHY-ST-ZIP

X 1/30/06 (561)

FILED

(521) 835-4996