

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2006 08:00 AM
Secretary of State

DOCUMENT # M99000000484

1. Entity Name
SPECTRUM FLORIDA, LLC



Principal Place of Business
1440 N. NOVA ROAD, SUITE 308
HOLLY HILL, FL 32117

Mailing Address
28969 INFORMATION LANE
EASTON, MD 21601



04282006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 52-2156185	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$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

**DO NOT WRITE
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 _____

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**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WICKS, DONALD E 1560 BROADWAY STE 2000 DENVER, CO 80202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BANTA, JOHN R 1440 N. NOVA ROAD, SUITE 308 HOLLY HILL, FL 32117
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05/17/06-80135-020 55.00

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IN THIS SPACE**

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: Donald E Wicks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/28/06 303-2298 9847