2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2006
Secretary of State

DOCUMENT# L02000027075

Entity Name: DEFRANCO LLC

Current Principal Place of Business:

5461 UNIVERSITY DRIVE
SUITE 103
CORAL SPRINGS, FL 33067

New Principal Place of Business:

Current Mailing Address:

5461 UNIVERSITY DRIVE
SUITE 103
CORAL SPRINGS, FL 33067

New Mailing Address:

FEI Number: 61-1428661 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEFRANCO, THOMAS J
10271 NW 62ND DRIVE
PARKLAND, FL 33076 US

Name and Address of New Registered Agent:

DEFRANCO, THOMAS J
7095 NW 127TH WAY
PARKLAND, FL 33076 US

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.

SIGNATURE: THOMAS J. DEFRANCO 02/08/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DEFRANCO, THOMAS J
Address: 10271 NW 62ND DRIVE
City-St-Zip: PARKLAND, FL 33076

Title: MGRM ( ) Delete
Name: DEFRANCO, TRACY A
Address: 10271 NW 62ND DRIVE
City-St-Zip: PARKLAND, FL 33076

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: DEFRANCO, THOMAS J
Address: 7095 NW 127TH WAY
City-St-Zip: PARKLAND, FL 33076

Title: MGRM (X) Change ( ) Addition
Name: DEFRANCO, TRACY A
Address: 7095 NW 127TH WAY
City-St-Zip: PARKLAND, FL 33076

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: THOMAS J. DEFRANCO MGRM 02/08/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date