## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000530

Address:

City-St-Zip:

201 BARRY COURT

LONGWOOD, FL 32779

Entity Name: ALL AMERICAN CHRISTIAN COUNSELING CENTER, LLC

FILED Mar 07, 2006 Secretary of State

| Current Principal Place of Business:          |  |                                  | New Principal Place of Business:  |   |  |
|---|--|----------------------------------|-----------------------------------|---|--|
|   | RY COURT<br>OD, FL 32779                 |                                  |                                   |   |  |
| Current Mailing Address:                      |  |                                  | New Mailing Address:              |   |  |
|   | RY COURT<br>OD, FL 32779                 |                                  |                                   |   |  |
| FEI Number                                    | : 11-2643611                             | FEI Number Applied For()         | FEI Number Not Applicable ( )     | Certificate of Status Desired ( )         |  |
| Name and Address of Current Registered Agent: |  |                                  | Name and Address of               | Name and Address of New Registered Agent: |  |
| 1404 EAS                                      | DEMRO, CPA<br>TROBINSON S<br>D, FL 32801 |                                  |                                   |   |  |
|   | e named entity s<br>e of Florida.        | submits this statement for the p | ourpose of changing its registere | d office or registered agent, or both,    |  |
| SIGNATUI                                      | RE:                                      |                                  |                                   |   |  |
|   | Electron                                 | ic Signature of Registered Age   | ent                               | Date                                      |  |
| MANAGING MEMBERS/MANAGERS:                    |  |                                  | ADDITIONS/CHANGES:                |   |  |
| Title:<br>Name:                               | MGRM ()<br>CARTER. MARI                  | Delete<br>ANNA                   | Title:<br>Name:                   | () Change () Addition                     |  |

Address:

City-St-Zip:

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: MARIANNA CARTER MGRM 03/07/2006