

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 31, 2006 8:00 am
Secretary of State

03-31-2006 90183 021 ****50.00

DOCUMENT # L03000053395

1. Entity Name

RICHARD MORETTI, LLC



Principal Place of Business

**1045 N HWY 1792
LONGWOOD, FL 32750 US**

Mailing Address

**7104 BLEDSOE AVE
ORLANDO, FL 32810 US**



03082008 No Chg-LLC

GR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-0512177

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ENGLEHARDT, JOHN C
1524 E LIVINGSTON ST.
ORLANDO, FL 32803**

**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: MEMBER
NAME: MORETTI, RICHARD
STREET ADDRESS: 2329 OVERSEAS HIGHWAY
CITY-STATE-ZIP: MARATHON, FL**

**TITLE:
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:**

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STREET ADDRESS:
CITY-STATE-ZIP:**

**DO NOT WRITE
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:

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

Date

Signature Printed Name

Richard H. Moretti

3/25/06 407 993.0025