

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046172

**FILED**  
**Apr 19, 2006**  
**Secretary of State**

**Entity Name:** CONTEMPO FLORIDA BUSINESS BROKERS, LLC

**Current Principal Place of Business:**

43344 HWY 27  
DAVENPORT, FL 33837 US

**New Principal Place of Business:**

**Current Mailing Address:**

43344 HWY 27  
DAVENPORT, FL 33837 US

**New Mailing Address:**

**FEI Number:** 83-0399294      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CENTRAL FLORIDA VISA GROUP, INC.  
43344 HWY 27  
DAVENPORT, FL 33837 US

**Name and Address of New Registered Agent:**

WHERRETT, DONALD  
43344 HWY 27  
DAVENPORT, FL 33837 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: DONALD WHERRETT

04/19/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: WHERRETT, DONALD  
Address: 7162 MONTREAL DR  
City-St-Zip: LAKELAND, FL 33809 US

Title: MGRM ( ) Delete  
Name: LEVENTHAL, GARY  
Address: 8126 FIRENZE BLVD  
City-St-Zip: ORLANDO, FL 32836 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: LEVENTHAL, GARY  
Address: 5090 DOWNPOINT LANE  
City-St-Zip: WINDERMERE, FL 34786 US

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: GARY LEVENTHAL

MGRM

04/19/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date