

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000067465

FILED
Mar 22, 2006
Secretary of State

Entity Name: SIGNATURE OF NORTH FLORIDA, LLC

Current Principal Place of Business:

5022 GATE PARKWAY
SUITE 208
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

5022 GATE PARKWAY
SUITE 208
JACKSONVILLE, FL 32256 US

New Mailing Address:

FEI Number: 20-1728282 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CYRUS, ROBERT R
214 NORTH THIRD STREET
SUITE A
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GUDAL, W. STEELE
Address: 5022 GATE PARKWAY, SUITE 208
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: MGRM () Delete
Name: LANE, DAVID
Address: 1263 PRESTON PLACE
City-St-Zip: JACKSONVILLE, FL 32207 US

ADDITIONS/CHANGES:

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

Title: () Change () Addition
Name:
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: W. STEELE GUDAL MGRM 03/22/2006

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