


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 02, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90031 048 \*\*\*\*50.00

DOCUMENT # L04000090584  
 1. Entity Name  
 E.L. PECK LLC



Principal Place of Business  
 1510 SUNSET LANE  
 TALLAHASSEE, FL 32303

Mailing Address  
 1510 SUNSET LANE  
 TALLAHASSEE, FL 32303

**DO NOT WRITE IN THIS SPACE**



05012006No Chg-LLC CR2E083 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PECK, E.L.  
 1510 SUNSET LANE  
 TALLAHASSEE, FL 32303

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00  
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PECK, E.L. 1510 SUNSET LANE TALLAHASSEE, FL 32303
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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: E.L. Peck Date: 5-1-06 Daytime Phone #: 850-443-2727

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