

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000043075

**FILED**  
**Apr 07, 2006**  
**Secretary of State**

**Entity Name:** MICHAEL BLACK, TAX & FINANCIAL ADVISOR LLC

**Current Principal Place of Business:**

4623 NW 53RD AVENUE  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

3711 NW 59TH PLACE  
GAINESVILLE, FL 32653

**New Mailing Address:**

4623 NW 53RD AVENUE  
GAINESVILLE, FL 32606

**FEI Number:** 20-0023905

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLACK, MICHAEL  
3711 NW 59TH PLACE  
GAINESVILLE, FL 32653 US

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

BLACK, MICHAEL  
14561 NW 21ST PLACE  
NEWBERRY, FL 32669 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: \_\_\_\_\_

04/07/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BLACK, MICHAEL D  
Address: 3711 NW 59TH PLACE  
City-St-Zip: GAINESVILLE, FL 32653

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BLACK, MICHAEL D  
Address: 14561 NW 21ST PLACE  
City-St-Zip: NEWBERRY, FL 32669

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: MICHAEL D BLACK

MGR

04/07/2006

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