

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000119883

Entity Name: 414 & 418, LLC

**FILED**  
**Apr 10, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

710 N.E. 17TH PLACE  
OCALA, FL 34470

**New Principal Place of Business:**

710 N.E. 17TH PLACE  
OCALA, FL 344703603 US

**Current Mailing Address:**

710 N.E. 17TH PLACE  
OCALA, FL 34470

**New Mailing Address:**

710 N.E. 17TH PLACE  
OCALA, FL 344703603 US

FEI Number: 20-4021477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HUMPHRIES, WESLEY W  
710 N.E. 17TH PLACE  
OCALA, FL 34470 US

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

HUMPHRIES, WESLEY W  
710 N.E. 17TH PLACE  
OCALA, FL 344703603 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:

04/10/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HUMPHRIES, WESLEY W  
Address: 710 N.E. 17TH PLACE  
City-St-Zip: OCALA, FL 34470

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: HUMPHRIES, WESLEY W  
Address: 710 N.E. 17TH PLACE  
City-St-Zip: OCALA, FL 344703603 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: WESLEY H HUMPHRIES

MGR

04/10/2006

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