

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000013205

FILED
Apr 29, 2005
Secretary of State

Entity Name: CHARDE PARTNERSHIP, LLC

Current Principal Place of Business:

% JAMES KARL & ASSOCIATES, P.A.
975 NORTH COLLIER BLVD.
MARCO ISLAND, FL 34145 07

Current Mailing Address:

% JAMES KARL & ASSOCIATES, P.A.
975 NORTH COLLIER BLVD.
MARCO ISLAND, FL 34145 07

New Principal Place of Business:

% JAMES KARL & ASSOCIATES, P.A.
975 NORTH COLLIER BLVD.
MARCO ISLAND, FL 34145 US

New Mailing Address:

% JAMES KARL & ASSOCIATES, P.A.
975 NORTH COLLIER BLVD.
MARCO ISLAND, FL 34145 US

FEI Number: 59-3680922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARETTA, ROBIN
C/O JAMES KARL & ASSOCIATES, P.A.
975 N COLLIER BOULEVARD
MARCO ISLAND, FL 34145 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/MEMBERS:

Title: MGRM () Delete
Name: CHARDE, JOSEPH B
Address: 18132 ROYAL HAMMOCK BLVD
City-St-Zip: NAPLES, FL 34114

Title: MGR () Delete
Name: DUQUET, ALLEN R
Address: P.O. BOX 2166E
City-St-Zip: MARCO ISLAND, FL 34146

Title: MGR () Delete
Name: GLYNN, BRIAN R
Address: 169 GODFREY RD.
City-St-Zip: LUDLOW, VT 05149

ADDITIONS/CHANGES:

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

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 Section 119.07(3)(i), 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: JOSEPH B. CHARDE

MGRM

04/29/2005

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