

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013015

Entity Name: PRUITT & ASSOCIATES, LLC

FILED
Apr 29, 2006
Secretary of State

Current Principal Place of Business:

1410 EMERSON STREET
LEESBURG, FL 32159

New Principal Place of Business:

Current Mailing Address:

PO BOX 555
LADY LAKE, FL 32159

New Mailing Address:

FEI Number: 59-3722902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRUITT, WILLIAM R
PO BOX 555
LADY LAKE, FL 32159 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: MGR () Delete
Name: PRUITT, WILLIAM R PRES
Address: PO BOX 555
City-St-Zip: LADY LAKE, FL 32159

Title: MGRM () Delete
Name: THOMPSON, KIMBERLI A SR.VP
Address: PO BOX 555
City-St-Zip: LADY LAKE, FL 32159

Title: MGRM () Delete
Name: GRANDE, ROBERT J JR.VP
Address: PO BOX 555
City-St-Zip: LADY LAKE, FL 32159

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: PRUITT, KIMBERLI A SR.VP
Address: PO BOX 555
City-St-Zip: LADY LAKE, FL 32159

Title: MGRM (X) Change () Addition
Name: PRUITT, SR., ROBERT D VP
Address: PO BOX 555
City-St-Zip: LADY LAKE, FL 32159

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: WILLIAM R. PRUITT

PRES

04/29/2006

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