


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 29, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000000464
 1. Entity Name
MCDIRMIT, DAVIS & COMPANY, LLC



Principal Place of Business: **605 ROBINSON STREET, SUITE 635 ORLANDO, FL 32801**
 Mailing Address: **605 ROBINSON STREET, SUITE 635 ORLANDO, FL 32801**

DO NOT WRITE IN THIS SPACE



03252006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 26-0004117	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
**MCDIRMIT, ELDEN G
 605 E ROBINSON STREET, STE. 635
 ORLANDO, FL 32801**

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

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCDIRMIT, ELDEN G 605 E. ROBINSON STREET, STE 635 ORLANDO, FL 32801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DAVIS, EUGENE R 605 E. ROBINSON STREET, STE 635 ORLANDO, FL 32801
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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: Elden G. McDirmit Date: 3-29-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #