

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000001230

**FILED**  
**Feb 28, 2005**  
**Secretary of State**

**Entity Name:** JACKY OF ALL TRADES TAX PREPARATION & PARALEGAL SERVICES, LLC

**Current Principal Place of Business:**

5815 AUTUMN RIDGE ROAD  
LAKE WORTH, FL 33463

**New Principal Place of Business:**

**Current Mailing Address:**

5815 AUTUMN RIDGE ROAD  
LAKE WORTH, FL 33463

**New Mailing Address:**

3871 FOREST DAWN COURT  
SNELLVILLE, GA 30039 US

**FEI Number:** 65-1157446

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEWIS, JACQUELINE  
5815 AUTUMN RIDGE ROAD  
LAKE WORTH, FL 33463 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: P ( ) Delete  
Name: LEWIS, JACQUELINE  
Address: 5815 AUTUMN RIDGE ROAD  
City-St-Zip: LAKE WORTH, FL 33463

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LEWIS, JACQUELINE  
Address: 3871 FOREST DAWN COURT  
City-St-Zip: SNELLVILLE, GA 30039 US

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: JACQUELINE LEWIS

MGRM

02/28/2005

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