

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013849

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

**Entity Name:** KENNETH MICHAEL & ASSOCIATES, L.L.C.

**Current Principal Place of Business:**

500 N. WESTSHORE BLVD.  
SUITE 1050  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

500 N. WESTSHORE BLVD.  
SUITE 1050  
TAMPA, FL 33609

**New Mailing Address:**

**FEI Number:** 01-0730264

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARNEY, MICHAEL J  
4713 W. MELROSE AVE.  
TAMPA, FL 33629 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: CARNEY, MICHAEL J  
Address: 4713 W. MELROSE AVE  
City-St-Zip: TAMPA, FL 33629

Title: MGR ( ) Delete  
Name: FOLKMAN, KENNETH T  
Address: 3231 FAIR OAKS AVE.  
City-St-Zip: TAMPA, FL 33611

**ADDITIONS/CHANGES:**

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 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:** MICHAEL J. CARNEY

MGR

01/10/2006

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