

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019552

**FILED**  
**Apr 19, 2006**  
**Secretary of State**

**Entity Name:** C. RANDOLPH COLEMAN, L.C.

**Current Principal Place of Business:**

9250 BAYMEADOWS ROAD  
450  
JACKSONVILLE, FL 322561813 US

**New Principal Place of Business:**

**Current Mailing Address:**

9250 BAYMEADOWS ROAD  
450  
JACKSONVILLE, FL 322561813 US

**New Mailing Address:**

**FEI Number:** 01-0738983

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLEMAN, CARL R  
9250 BAYMEADOWS ROAD  
230  
JACKSONVILLE, FL 322561813 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:** MGRM ( ) Delete  
**Name:** COLEMAN, CARL R  
**Address:** 9250 BAYMEADOWS ROAD STE 450  
**City-St-Zip:** JACKSONVILLE, FL 322561813

**ADDITIONS/CHANGES:**

**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:** C. RANDOLPH COLEMAN

MGRM

04/19/2006

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