

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000023596

FILED  
May 01, 2006  
Secretary of State

Entity Name: JOSEPH C. PIPER, L.L.C.

**Current Principal Place of Business:**

3401 GULF SHORE BLVD. NORTH, #202  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

3401 GULF SHORE BLVD. NORTH, #202  
NAPLES, FL 34103

**New Mailing Address:**

FEI Number: 42-1523730      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

CLSP INC  
3001 TAMIAMI TRAIL NORTH 4TH FLOOR  
NAPLES, FL 34103      US

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: PIPER, JOSEPH C  
Address: 3401 GULF SHORE BLVD. NORTH, #202  
City-St-Zip: NAPLES, FL 34103

Title: MGRM ( ) Delete  
Name: PIPER, LYNN TRUSTEE  
Address: 3401 GULF SHORE BLVD. NORTH, #202  
City-St-Zip: NAPLES, FL 34103

Title: MGRM ( ) Delete  
Name: PIPER, JOSEPH COPELAN II  
Address: 6415 W. ROOSEVELT  
City-St-Zip: PHOENIX, AZ 85043

Title: MGRM ( ) Delete  
Name: PIPER, JAMES BLANDIN  
Address: 10791 NEHA COURT  
City-St-Zip: GREAT FALLS, VA 22066

Title: MGRM ( ) Delete  
Name: PIPER, JOHN GIBBON  
Address: 4302 OAKWOOD LANE  
City-St-Zip: WEST DES MOINES, IA 50265

**ADDITIONS/CHANGES:**

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

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

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

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: LYNN & JOSEPH PIPER

MGRM

05/01/2006

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