2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State
04-04-2006 90009 050 ****50.00

DOCUMENT # L02000024779

1. Entity Name
MORGAN & MORGAN COMPANIES LLC.

30005007

Principal Place of Business	Mailing Address
C/O KIMBERLY MORGAN 821 HARBOUR ISLES PLACE NORTH PALM BEACH, FL 33410	C/O KIMBERLY MORGAN 821 HARBOUR ISLES PLACE NORTH PALM BEACH, FL 33410

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01092006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
51-0429840
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BOOSE, WILLIAM R III
515 NORTH FLAGLER DRIVE, SUITE 1900
WEST PALM BEACH, FL 33401

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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 _____ 3-20-06
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	MGRM
NAME	MORGAN, KIMBERLY
STREET ADDRESS	821 HARBOUR ISLES PLACE
CITY-ST-ZIP	NORTH PALM BEACH, FL 33410
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 3-20-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #