

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000025832

**FILED**  
**Apr 26, 2006**  
**Secretary of State**

**Entity Name:** PINPOINT MARKETING, LLC

**Current Principal Place of Business:**

4492 N.E. SKYLINE DRIVE  
JENSEN BEACH, FL 34957

**New Principal Place of Business:**

**Current Mailing Address:**

4492 N.E. SKYLINE DRIVE  
JENSEN BEACH, FL 34957

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

RASMUSSEN, C B  
4492 N.E. SKYLINE DRIVE  
JENSEN BEACH, FL 34957 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: RASMUSSEN, C B  
Address: 4492 N.E. SKYLINE DRIVE  
City-St-Zip: JENSEN BEACH, FL 34957

**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 B RASMUSSEN

MGRM

04/26/2006

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