


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000028717		
1. Entity Name SILBERMAN INSURANCE AND FINANCIAL SERVICES PLLC		
Principal Place of Business 815 NORTHWEST 23RD AVENUE GAINESVILLE, FL 32609 US	Mailing Address 815 NORTHWEST 23RD AVENUE GAINESVILLE, FL 32609 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SILBERMAN, DONALD L 4809 NW 36TH PLACE GAINESVILLE, FL 32606-5996		DO NOT WRITE IN THIS SPACE
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 <u><i>Donald L. Silberman</i></u> (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRES SILBERMAN, DONALD L 4809 NW 36TH PLACE GAINESVILLE, FL 326065996	
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: <u><i>Donald L. Silberman</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date <u><i>April 25, 2006</i></u> 352-371-7777 Daytime Phone #



01052006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 02-0652762	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

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05/17/06-80135-015 55.00