

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000035186

Entity Name: J. ROLAND LIEBER, PLLC

FILED
Jan 11, 2006
Secretary of State

Current Principal Place of Business:

399 TWELFTH AVENUE SOUTH
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

399 TWELFTH AVENUE SOUTH
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 90-0145350

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIEBER, J ROLAND
399 TWELFTH AVENUE SOUTH
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

RIBES, JOHN P
399 TWELFTH AVENUE SOUTH
NAPLES, FL 34102 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: JOHN P. RIBES, FASLA

01/11/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LIEBER, JOHN ROLAND
Address: 399 TWELFTH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: MGRM () Delete
Name: RIBES, JOHN P
Address: 399 TWELFTH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RIBES, JOHN P
Address: 399 TWELFTH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: MGRM (X) Change () Addition
Name: TINDELL, RICHARD T
Address: 399 TWELFTH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: MGRM () Change (X) Addition
Name: EISELE, ANDREW D
Address: 399 TWELFTH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

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: JOHN P. RIBES, FASLA

MGRM

01/11/2006

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