

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000002976

FILED  
Apr 30, 2006  
Secretary of State

Entity Name: OSWALD ASSET MANAGEMENT, LLC

**Current Principal Place of Business:**

2710 ALTERNATE US 19 NORTH  
SUITE 401-C  
PALM HARBOR, FL 34683

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1085  
PALM HARBOR, FL 346821085

**New Mailing Address:**

FEI Number: 20-0857599

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PRESIDENTIAL SERVICES INCORPORATED  
1217 CAPE CORAL PKWY  
300  
CAPE CORAL, FL 339049604 US

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

JAMES L. CLARKS, PA.  
2909 WEST BAY TO BAY BOULEVARD  
SUITE 206  
TAMPA, FL 33629 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: JAMES L. CLARK, ESQ.

04/30/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FOERDERER, ALICE M MS  
Address: PO BOX 1085  
City-St-Zip: PALM HARBOR, FL 346821085

Title: MGRM ( ) Delete  
Name: JAUFMANN, JR., EDWIN J MR  
Address: PO BOX 1085  
City-St-Zip: PALM HARBOR, FL 346821085

**ADDITIONS/CHANGES:**

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: ALICE M. FOERDERER FOR OSWALD ASSET MANAGE

MGRM

04/30/2006

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