

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006398

Entity Name: MADEIRA PRINTING, LLC

FILED
Apr 25, 2006
Secretary of State

Current Principal Place of Business:

213 - 150TH AVENUE
MADEIRA BEACH, FL 33708

New Principal Place of Business:

Current Mailing Address:

213 - 150TH AVENUE
MADEIRA BEACH, FL 33708

New Mailing Address:

FEI Number: 34-1975148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN HOVEN, ABRAM A
213 - 150TH AVENUE
MADEIRA BEACH, FL 33708 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: MGR () Delete
Name: VAN HOVEN, JUNE M
Address: 213 - 150TH AVENUE
City-St-Zip: MADEIRA BEACH, FL 33708

Title: MGR () Delete
Name: VAN HOVEN, ABRAM A
Address: 213 - 150TH AVENUE
City-St-Zip: MADEIRA BEACH, FL 33708

Title: MGR () Delete
Name: VAN HOVEN, DANIEL L
Address: 213 - 150TH AVENUE
City-St-Zip: MADEIRA BEACH, FL 33708

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DANIEL VAN HOVEN

MGR

04/25/2006

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