

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000008267

Entity Name: CODY'S CREATIONS LLC

**FILED**  
**Feb 12, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

14765 PADDOCK DR  
WEST PALM BEACH, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

14765 PADDOCK DR  
WEST PALM BEACH, FL 33414

**New Mailing Address:**

FEI Number: 81-0555732

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WHELIHAN, MAUREEN MD  
941 FOURTH STREET  
MIAMI BEACH, FL 33139 US

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

WHELIHAN, MAUREEN MD  
14765 PADDOCK DR  
WELLINGTON, FL 33414 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: MAUREEN WHELIHAN MD

02/12/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BROWN, CODY M  
Address: 14765 PADDOCK DR  
City-St-Zip: WEST PALM BEACH, FL 33414

**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: CODY M BROWN

PRES

02/12/2006

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