## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000028655

Entity Name: FORT KNOX FINE ART SERVICES & STORAGE CO, LLC

FILED Jul 25, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1016 CLARE AVE. BLDG 5 601 N CONGRESS AVE. WEST PALM BEACH, FL 33401

SUITE 305

DELRAY BEACH, FL 33445

**Current Mailing Address: New Mailing Address:** 

601 N. CONGRESS AVE 1016 CLARE AVE. BLDG 5

SUITE 305 WEST PALM BEACH, FL 33401

DELRAY BEACH, FL 33445

FEI Number: 65-1200156 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SCHULTZ, AMY E 700 NORTH OLIVE AVE

MANAGING MEMBERS/MANAGERS:

WEST PALM BEACH, FL 33401 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:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MGRM Title: () Change () Addition () Delete

STARETZ, ROBERT L Name: Name: 5080 ALENCIA CT Address: Address: City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition

BOCOCK, RAMPS Name: BOCOCK, JAMES Name: Address: 2367 NW 25TH CT. Address: 2367 NW 25TH CT. City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: BOCA RATON, FL 33434

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition ROSENBERG, IRD ROSENBERG, IRA Name: Name:

Address: 3635 CARLTON PL Address: 3635 CARLTON PL City-St-Zip: BOCA RATON, FL 33496 City-St-Zip: BOCA RATON, FL 33496

( ) Delete Title: MGRM Title: MGRM (X) Change ( ) Addition

YAWNSENO, TYLER Name: Name: TOWNSEND, TYLER Address: 700 NE 5TH AVE Address: 700 NE 5TH AVE City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: POMPANO BEACH, FL 33060

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: JAMES B. BOCOCK 07/25/2006