

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030157

FILED
Apr 30, 2006
Secretary of State

Entity Name: FLORIDA REFERRAL NETWORK, L.L.C.

Current Principal Place of Business:

215 CELEBRATION PLACE, STE. 190
CELEBRATION, FL 34747

New Principal Place of Business:

Current Mailing Address:

215 CELEBRATION PLACE, STE. 190
CELEBRATION, FL 34747

New Mailing Address:

FEI Number: 20-2264227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARVEY, MICHAEL
500 MIRSOL CIRCLE, UNIT 105
CELEBRATION, FL 34747 US

Name and Address of New Registered Agent:

HARVEY, MICHAEL
215 CELEBRATION PLACE SUITE 190
CELEBRATION, FL 34747 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: _____

04/30/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BUONCERVELLO, ANGELA MARIA
Address: 815 SPRING PARK LOOP
City-St-Zip: CELEBRATION, FL 34747

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BUONCERVELLO, ANGELA MARIA
Address: PO BOX 470127
City-St-Zip: CELEBRATION, FL 34747

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: ANGELA MARIA BUONCERVELLO

MGRM

04/30/2006

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