

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031861

FILED  
May 16, 2006  
Secretary of State

**Entity Name:** TRANSITIONS MESSAGE, LLC

**Current Principal Place of Business:**

402 71ST STREET  
HOLMES BEACH, FL 34217

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1153  
HOLMES BEACH, FL 34218

**New Mailing Address:**

FEI Number: 16-1688714      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:**

TERMINI, PAULA M  
402 71ST STREET  
HOLMES BEACH, FL 34217      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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: TERMINI, PAULA M  
Address: 402 71ST STREET  
City-St-Zip: HOLMES BEACH, FL 34217

**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: PAULA TERMINI

MGR

05/16/2006

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