

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000032118

1. Entity Name
 IVA, LLC



Principal Place of Business Mailing Address

516 LAKEVIEW ROAD, UNIT 8 516 LAKEVIEW ROAD, UNIT 8
 CLEARWATER, FL 33756-3302 CLEARWATER, FL 33756-3302

DO NOT WRITE IN THIS SPACE



01172006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 16-1684658	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FLYNN, KEVIN T
 516 LAKEVIEW ROAD, UNIT 8
 CLEARWATER, FL 33756-3302

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when restate(s)) DATE _____

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FLYNN, THOMAS F 516 LAKEVIEW ROAD, #8 CLEARWATER, FL 33756
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FLYNN, KEVIN T 516 LAKEVIEW ROAD, #8 CLEARWATER, FL 33756
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 03/08/06-80081-002 55.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Kevin T. Flynn Kevin T. Flynn, Vice President Date: 2/23/06 727-449-1182

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #