

**2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Sep 27, 2005  
Secretary of State**

DOCUMENT# L03000034861

Entity Name: ROCKWELL ACCOUNTING, LLC

**Current Principal Place of Business:**

912 W MICHIGAN AVE  
PENSACOLA, FL 32505

**New Principal Place of Business:**

**Current Mailing Address:**

912 W MICHIGAN AVE  
PENSACOLA, FL 32505

**New Mailing Address:**

FEI Number: 47-0930385      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ROCKWELL, CEREZA  
912 W MICHIGAN AVE  
PENSACOLA, FL 32505      US

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

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: MGRM ( ) Delete  
Name: ROCKWELL, CEREZA  
Address: 912 W MICHIGAN AVE  
City-St-Zip: PENSACOLA, FL 32505

Title: MGRM ( ) Delete  
Name: DEGUZMAN, MARK  
Address: 912 W MICHIGAN AVE  
City-St-Zip: PENSACOLA, FL 32505

Title: MGRM ( ) Delete  
Name: VITAL, VILLAMOR  
Address: 912 W MICHIGAN AVE  
City-St-Zip: PENSACOLA, FL 32505

Title: MGRM ( ) Delete  
Name: DEGUZMAN, CORAZON  
Address: 912 W MICHIGAN AVE  
City-St-Zip: PENSACOLA, FL 32505

Title: MGRM ( ) Delete  
Name: DEGUZMAN, CAMILLEE  
Address: 912 W MICHIGAN AVE  
City-St-Zip: PENSACOLA, FL 32505

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: DOTLICH, CORAZON  
Address: 912 W MICHIGAN AVE  
City-St-Zip: PENSACOLA, FL 32505

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Change (X) Addition  
Name: ROBINSON, PRENTICE  
Address: 912 W MICHIGAN AVE  
City-St-Zip: PENSACOLA, FL 32505

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PRENTICE ROBINSON

MGRM

09/27/2005

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