## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0400000387

Entity Name: KLUGER WALLACE PARTNERSHIP, LLC

FILED Apr 26, 2005 Secretary of State

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

3100 U S 1 SOUTH 3100 U S 1 SOUTH

SUITE 2 SUITE 2

ST AUGUSTINE., ST AUGUSTINE., FL 32086 US

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

3100 U S 1 SOUTH 3100 U S 1 SOUTH

SUITE 2 SUITE 2

ST AUGUSTINE,, FL 32086 ST AUGUSTINE,, FL 32086 US

FEI Number: 20-2664591 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KLUGER, WARREN S 3100 US 1 SOUTH SUITE 2

ST AUGUSTINE, FL 32086 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/MEMBERS:

ADDITIONS/CHANGES:

MGRM Title: MGRM (X) Change ( ) Addition () Delete KLUGER, WARREN S KLUGER, WARREN S Name: Name: 3100 U S 1 SOUTH Address: 3100 U S 1 SOUTH Address:

City-St-Zip: ST AUGUSTINE, FL 32086 City-St-Zip: ST AUGUSTINE, FL 32086 US

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

WALLACE, HOWE Q Name: WALLACE, HOWE Q Address: 1180 GEORGE STREET Address: 1180 GEORGE STREET City-St-Zip: BARTOW, FL 33831 City-St-Zip: BARTOW, FL 33831 US

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

GRAFFT, JARRELL D Name: GRAFFT, JARRELL D Name: Address: P O BOX 3714 Address: P O BOX 3714

City-St-Zip: ST AUGUSTINE, FL 32085 City-St-Zip: ST AUGUSTINE, FL 32085 US

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: HOWE Q. WALLACE JR. **MGRM** 04/26/2005