


FILED

Jul 31, 2006 08:00 AM
Secretary of State

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L04000001273 1. Entity Name JIANNETTO INSTITUTE, LLC	
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Principal Place of Business 151 REGIONS WAY BUILDING 1 SUITE D & E DESTIN, FL 32541	Mailing Address 151 REGIONS WAY BUILDING 1 SUITE D & E DESTIN, FL 32541
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DO NOT WRITE IN THIS SPACE



07272006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-0571674	App'ed For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent JIANNETTO, DANIEL F 151 REGIONS WAY BUILDING 1 SUITE D & E DESTIN, FL 32541	DO NOT WRITE IN THIS SPACE
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B. 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 amending) _____ DATE _____

**Filing Fee is \$50.00
Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM JIANNETTO, DANIEL F 151 REGIONS WAY BUILDING 1 SUITE D DESTIN, FL 32541
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08/01/06-80008-013 50.00

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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: Daniel F. Giannetto 7-26-06 850-650-7560
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #