

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000006361

Entity Name: AMALFI PARTNERS, LLC

FILED
Jul 18, 2006
Secretary of State

Current Principal Place of Business:

8048 WESTCHESTER PLACE
MONTGOMERY, AL 36117

New Principal Place of Business:

Current Mailing Address:

8048 WESTCHESTER PLACE
MONTGOMERY, AL 36117

New Mailing Address:

FEI Number: 63-1207076 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:

COFFIELD, P. COLLEEN
1719 S. COUNTY HWY 393
SANTA ROSA BEACH, FL 32459 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: DABBS, KARL
Address: 8048 WESTCHESTER PLACE
City-St-Zip: MONTGOMERY, AL 36117

Title: MGR () Delete
Name: PATE, GARY
Address: 9208 BRIDGE POINT
City-St-Zip: MONTGOMERY, AL 36117

Title: MGR () Delete
Name: GRIZZELL, TODD
Address: 5756 DYNASTY RIDGE CT.
City-St-Zip: COLORADO SPRINGS, CO 80918

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:

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: KARL L DABBS

MGR

07/18/2006

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