

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000030628

**FILED**  
**Apr 03, 2007**  
**Secretary of State**

**Entity Name:** SOAN CHAU & ASSOCIATES, LLC

**Current Principal Place of Business:**

1405 NW 100TH TERRACE  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

6906 DUNCASTER STREET  
WINDERMERE, FL 34786

**Current Mailing Address:**

1405 NW 100TH TERRACE  
GAINESVILLE, FL 32606

**New Mailing Address:**

3905 OLDE CLOISTER COVE  
CUMMING, GA 30040

FEI Number: 06-1723340

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DUONG, TIEN  
144 DOLCETTO DRIVE  
DAVENPORT, FL 33897 US

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

DUONG, TIEN  
144 DOLCETTO DR.  
DAVENPORT, FL 33897 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: \_\_\_\_\_

04/03/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CHAU, SOAN H  
Address: 1405 NW 100TH TERR  
City-St-Zip: GAINESVILLE, FL 32606

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CHAU, SOAN H  
Address: 3905 OLDE CLOISTER COVE  
City-St-Zip: CUMMING, GA 30040

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: SOAN CHAU

MGR

04/03/2007

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