2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000039557

AFFORDABLE SCREENING, L.L.C.



FILED Jul 12, 2006 08:00 AM **Secretary of State**

Principal Place of Business

Mailing Address

340 20TH STREET NE NAPLES, FL 34120

340 20TH STREET NE NAPLES, FL 34120



02142006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1086852

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

LEBORGNE, JEREMY 340 20TH STREET NE

DO NOT WRITE

NAPLES, FL 34120		IN THIS SPACE	
8. The above the obligat	named entity submits this statement for the purpose of char ions of registered agent.	l aging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and little if applicable	(NOTE Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2006		·	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM LEBORGNE, JEREMY 340 20TH STREET NE NAPLES, FL 34120		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE	l		

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: 5 SIGNATURE MID TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

NAME STREET ADDRESS CITY - ST-7IP