## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000041148

Entity Name: LDS & ASSOCIATES, LLC

FILED Apr 06, 2006 Secretary of State

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

3605 E. LAKE TODD DR. 3640 N. CARL G. ROSE HWY HERNANDO, FL 34442 HERNANDO, FL 34442

Current Mailing Address: New Mailing Address:

3605 E. LAKE TODD DR.
HERNANDO, FL 34442

3640 N. CARL G. ROSE HWY.
HERNANDO, FL 34442

FEI Number: 20-1301576 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:

SIMON, DAWN O
3605 E. LAKE TODD DR..
HERNANDO, FL 34442 US
SIMON, DAWN O
1094 S. CHATEAU PT.
INVERNESS, FL 34450 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: 04/06/2006

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

Name: SIMON, DAWN O Name: SIMON, DAWN O Address: E. LAKE TODD DR. Address: 1094 S. CHATEAU PT City-St-Zip: HERNANDO, FL 34442 City-St-Zip: INVERNESS, FL 34450

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

 Name:
 SIMON, LEWIS F
 Name:
 SIMON, LEWIS F

 Address:
 E. LAKE TODD DR.
 Address:
 1094 S. CHATEAU PT.

City-St-Zip: HERNANDO, FL 34442 City-St-Zip: INVERNESS, FL 34450

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition Name: BORGESON, SCOTT Name:

 Name
 Borgeson, Scott
 Name

 Address:
 9310 E. GOBBLER DR.
 Address:

 City-St-Zip:
 FLORAL CITY, FL 34436
 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: DAWN O. SIMON MGRM 04/06/2006