

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000041351 1. Entity Name ERNST & WEBB, LLC	
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Principal Place of Business 809 WALKERBILT RD STE 8 NAPLES, FL 34110	Mailing Address 963 BARCAMIL WAY NAPLES, FL 34110
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DO NOT WRITE IN THIS SPACE



02202006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1194814	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

WEBB, CHARLES R
963 BARCAMIL WAY
NAPLES, FL 34110

**DO NOT WRITE
IN THIS SPACE**

8. 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 reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2006**

1108003466377
03/23/06-80009-004 \$0.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WEBB, CHARLES R 963 BARCAMIL WAY NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ERNST, ROBERT 26042 CLARKSTON DR BONITA SPRINGS, FL 34135
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**DO NOT WRITE
IN THIS SPACE**

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:  **3/8/06** **239 591 0329**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #