## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Aug 04, 2006 08:00 Al Secretary of State DOCUMENT # L04000046228 1. Entity Name PRN MONITORING, LLC Principal Place of Business Mailing Address 815 BRIERCLIFF DR. 815 BRIERCLIFF DR. ORLANDO, FL 32806 ORLANDO, FL 32806 08022006No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1367036 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HATCH, CHRISTINE R.N. DO NOT WRITE 815 BRIERCLIFF DR. ORLANDO, FL 32806 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. fur batch CHUSTINE HATCH (NOTE: Registered Agent argneture required when rematating) Filing Fee is \$50.00 Due by September 6, 2006 MANAGING MEMBERS/MANAGERS 9. TITLE MGR HATCH, CHRISTINE R.N. NAME U00000573368 STREET ADDRESS 815 BRIERCLIFF DR. 08/04/06-80005-011 50.00 CITY-ST-ZIP ORLANDO, FL 32806 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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.

estatel CONSTNO HATCH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE:

**FILED** 

Daytime Phone #