

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052562

FILED
May 01, 2006
Secretary of State

Entity Name: LABOR LAW COMPLIANCE INSTITUTE, LLC

Current Principal Place of Business:

1453 GULF TO BAY BLVD.
SUITE B
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

1453 GULF TO BAY BLVD.
SUITE B
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 20-1205238 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MILLS, RALPH
6841 NORTH ST. ANDREWS DRIVE
HIALEAH, FL 33015 US

Name and Address of New Registered Agent:

KRONEN, PATRICIA M MRS
1876 BRENTWOOD DR
CLEARWATER, FL 33764 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: PATRICIA KRONEN

05/01/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MILLS, RALPH
Address: 6841 NORTH ST. ANDREWS DRIVE
City-St-Zip: HIALEAH, FL 33015

Title: MGR () Delete
Name: KRONEN, JAMES
Address: 1455 GULF TO BAY BLVD.
City-St-Zip: CLEARWATER, FL 33755

Title: MGR () Delete
Name: KRONEN, PATRICIA
Address: 1455 GULF TO BAY BLVD.
City-St-Zip: CLEARWATER, FL 33755

Title: MGR () Delete
Name: MILLS, BARBARA
Address: 6841 NORTH ST. ANDREWS DRIVE
City-St-Zip: HIALEAH, FL 33015

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: PATRICIA KRONEN

MGR

05/01/2006

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