2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 25, 2006
Secretary of State

DOCUMENT# L04000057443

Entity Name: WOLF INVESTIGATIVE SPECIALISTS, LLC

Current Principal Place of Business:

38333 CR 439
EUSTIS, FL 32736 US

New Principal Place of Business:

450 HILLCREST COURT
MT. DORA, FL 32757 US

Current Mailing Address:

PO BOX 181724
CASSELBERRY, FL 32736 US

New Mailing Address:

450 HILLCREST COURT
MT. DORA, FL 32757 US

FEI Number: 20-1441195 **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:

SMITH, STEPHANIE
38333 CR 439
EUSTIS, FL 32736 US

Name and Address of New Registered Agent:

SMITH, STEPHANIE
23720 CR 44A
EUSTIS, FL 32736 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: STEPHANIE SMITH 05/25/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: HOPKINS, LESLEIGH
Address: PO BOX 181724
City-St-Zip: CASSELBERRY, FL 32718 US

ADDITIONS/CHANGES:

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: STEPHANIE SMITH RA 05/25/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date