

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000058423

**FILED**  
**Apr 12, 2006**  
**Secretary of State**

**Entity Name:** ORANGE TAX SERVICES, L.L.C.

**Current Principal Place of Business:**

12711 WHITERAPIDS DRIVE  
ORLANDO, FL 32828

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 781018  
ORLANDO, FL 328781018

**New Mailing Address:**

12711 WHITERAPIDS DRIVE  
ORLANDO, FL 32828

**FEI Number:** 20-1435389

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WIGGINS, LARALEE  
12711 WHITERAPIDS DRIVE  
ORLANDO, FL 32828 US

**Name and Address of New Registered Agent:**

DEHART, LARALEE  
12711 WHITERAPIDS DRIVE  
ORLANDO, FL 32828 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:** LARALEE DEHART

04/12/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** WIGGINS, LARALEE  
**Address:** 12711 WHITERAPIDS DRIVE  
**City-St-Zip:** ORLANDO, FL 32828

**ADDITIONS/CHANGES:**

**Title:** MGRM (X) Change ( ) Addition  
**Name:** DEHART, LARALEE  
**Address:** 12711 WHITERAPIDS DRIVE  
**City-St-Zip:** ORLANDO, FL 32828

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:** LARALEE DEHART

MGRM

04/12/2006

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