

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90031 040 ****50.00

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04052006 Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1636925 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

DOCUMENT # L04000062078

1. Entity Name
COMPTON & DELANEY, LLC



Principal Place of Business
1342 CAMPBELL STREET
ORLANDO, FL 32806

Mailing Address
1342 CAMPBELL STREET
ORLANDO, FL 32806

2. Principal Place of Business
400 E. Compton Street
Suite, Apt. #, etc.

3. Mailing Address
400 E. Compton Street
Suite, Apt. #, etc.

City & State
Orlando, FL

City & State
Orlando, FL

Zip 32806 Country USA

Zip 32806 Country USA

6. Name and Address of Current Registered Agent

DELOACH BRYANT, CARLA
1342 CAMPBELL STREET
ORLANDO, FL 32806

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
1206 E. Ridgewood Street

City Orlando FL Zip Code 32803

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 *[Signature]* DATE 4/11/2006

(NOTE: Registered Agent signature required when reinstating)

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

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WNER DELOACH, DAVID B 1342 CAMPBELL ST ORLANDO, FL 32806 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DeLoach, D. 400 E. Compton Street Orlando, FL 32806 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SPUE DELOACH, JACQUELINE H 1342 CAMPBELL ST ORLANDO, FL 32806 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DeLoach, J. 400 E. Compton Street Orlando, FL 32806 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *[Signature]* J. DeLoach 4/11/06 407-740-5005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ATTACHMENT
CARLA DELOACH BRYANT
ATTORNEYS & COUNSELORS AT LAW, P.A.

April 10, 2006

Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

20030311
#104000062078

Re: Annual Business Report for Compton & Delaney, LLC

Dear Sir or Madam:

Enclosed please find the 2006 Uniform Business Report for Compton & Delaney, LLC and a check, made payable to the Florida Department of State in the amount of fifty dollars (\$50.00).

If you have any questions regarding this filing, please contact my office.

I remain

Very truly yours,



Rebekah M. Kurdziel
For the Firm

RMK/js
enclosures