

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065137

FILED
Jul 12, 2005
Secretary of State

Entity Name: EDNA ESCUDERO INSURANCE AND FINANCIAL SERVICES, LLC

Current Principal Place of Business:

285 BRIAR CIRCLE
ORLANDO, FL 32825

New Principal Place of Business:

6419 S CHICKASAW TRAIL
ORLANDO, FL 32829

Current Mailing Address:

285 BRIAR CIRCLE
ORLANDO, FL 32825

New Mailing Address:

701 CHEVIOT CT
APOPKA, FL 32712

FEI Number: 56-2478756 **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:

ESCUDERO, EDNA
285 BRIAR CIRCLE
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

ESCUDERO, EDNA
701 CHEVIOT CT
APOPKA, FL 32712 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: EDNA ESCUDERO

07/12/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ESCUDERO, EDNA
Address: 285 BRIAR CIRCLE
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ESCUDERO, EDNA
Address: 701 CHEVIOT CT
City-St-Zip: APOPKA, FL 32712

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EDNA ESCUDERO

MGRM

07/12/2005

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