

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000070295

1. Entity Name
ROBERT LOUIS FONTANA, PLC



Principal Place of Business
**1951 CASSIA LANE
TRINITY, FL 34655 US**

Mailing Address
**1951 CASSIA LANE
TRINITY, FL 34655 US**

DO NOT WRITE IN THIS SPACE



04262006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1667264

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FONTANA, ROBERT
1951 CASSIA LANE
TRINITY, FL 34655**

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

U00000561483
05/19/06-80016-010 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM FONTANA, ROBERT 1951 CASSIA LANE TRINITY, FL 34655
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IN THIS SPACE**

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:

Robert Louis Fontana

4-28-06