

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000090167	
1. Entity Name EMERSON TELEMARKETING LLC	

Principal Place of Business 1016 COLLIER CENTE WAY, SUITE 103 NAPLES, FL 34110	Mailing Address 1016 COLLIER CENTE WAY, SUITE 103 NAPLES, FL 34110
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01102006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FCI Number 20-1804335	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CONNORS, MICHAEL J 1016 COLLIER CENTE WAY, SUITE 103 NAPLES, FL 34110

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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 _____ DATE _____
Signature of the person who is the registered agent or registered office, or both, in the State of Florida. If the registered agent is a corporation, the signature of the president or other officer of the corporation must be provided.

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY ST ZIP	MGR CONNORS, MICHAEL J 1016 COLLIER CENTE WAY, SUITE 103 NAPLES, FL 34110
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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 606, Florida Statutes.

SIGNATURE:  **1/15/06** **2392540175**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE