

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000094386

Entity Name: FOGAL & ASSOCIATES, LLC

FILED
Jan 17, 2006
Secretary of State

Current Principal Place of Business:

603 NORTH INDIAN RIVER DRIVE, SUITE 300
FORT PIERCE, FL 34950

New Principal Place of Business:

1115 DELAWARE AVENUE
FORT PIERCE, FL 34950

Current Mailing Address:

603 NORTH INDIAN RIVER DRIVE, SUITE 300
FORT PIERCE, FL 34950

New Mailing Address:

1115 DELAWARE AVENUE
FORT PIERCE, FL 34950

FEI Number: 20-1973727

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOGAL, CHRISTOPHER E
603 NORTH INDIAN RIVER DRIVE, SUITE 300
FORT PIERCE, FL 34950 US

Name and Address of New Registered Agent:

FOGAL, CHRISTOPHER E
1115 DELAWARE AVENUE
FORT PIERCE, FL 34950 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:

01/17/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FOGAL, CHRISTOPHER E
Address: 603 NORTH INDIAN RIVER DRIVE SUITE 300
City-St-Zip: FORT PIERCE, FL 34950

Title: MGRM () Delete
Name: LUDWIG, STACI L
Address: 603 NORTH INDIAN RIVER DRIVE SUITE 300
City-St-Zip: FORT PIERCE, FL 34950

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FOGAL, CHRISTOPHER E
Address: 1115 DELAWARE AVENUE
City-St-Zip: FORT PIERCE, FL 34950

Title: MGRM (X) Change () Addition
Name: LUDWIG, STACI L
Address: 1115 DELAWARE AVENUE
City-St-Zip: FORT PIERCE, FL 34950

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: CHRISTOPHER E. FOGAL

MGRM

01/17/2006

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