## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000006216

Entity Name: CREATIVE FORGE, LC

**FILED** May 09, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5652 ISABELLE AVE. 1830 S. CLYDE MORRIS BLVD. PORT ORANGE, FL 32127

42

DAYTONA BEACH, FL 32119 US

**Current Mailing Address: New Mailing Address:** 

5652 ISABELLE AVE. P.O. BOX 291846

PORT ORANGE, FL 32127 PORT ORANGE, FL 32129 US

FEI Number: 59-3796787 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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: Name and Address of New Registered Agent:

DANN, SHANNON DANN, SHANNON

5652 ISABELLE AVE. 1830 S. CLYDE MORRIS BLVD. PORT ORANGE, FL 32127 US

DAYTONA BEACH, FL 32119 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: 05/09/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM ( ) Delete Title: (X) Change ( ) Addition

DANN, SHANNON Name: Name: DANN, SHANNON Address: 5652 ISABELLE AVE. Address: 1830 S. CLYDE MORRIS BLVD. #42 City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: DAYTONA BEACH, FL 32119 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: SHANNON DANN **MGRM** 05/09/2006