

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000011805

Entity Name: KEVIN C. SHIRLEY, LLC

FILED  
Feb 10, 2006  
Secretary of State

## Current Principal Place of Business:

126 E. OLYMPIA AVENUE, SUITE 304  
PUNTA GORDA, FL 33950

## New Principal Place of Business:

126 E. OLYMPIA AVENUE  
304  
PUNTA GORDA, FL 33950

## Current Mailing Address:

126 E. OLYMPIA AVENUE, SUITE 304  
PUNTA GORDA, FL 33950

## New Mailing Address:

126 E. OLYMPIA AVENUE  
SUITE 304  
PUNTA GORDA, FL 33950

FEI Number: 20-3919808

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHIRLEY, KEVIN C  
126 E. OLYMPIA AVENUE, SUITE 304  
PUNTA GORDA, FL 33950 US

## Name and Address of New Registered Agent:

SHIRLEY, KEVIN C OWNER  
126 E. OLYMPIA AVENUE  
304  
PUNTA GORDA, FL 33950 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: KEVIN C. SHIRLEY

02/10/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SHIRLEY, KEVIN C  
Address: 126 E. OLYMPIA AVENUE, SUITE 304  
City-St-Zip: PUNTA GORDA, FL 33950

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: SHIRLEY, KEVIN C OWNER  
Address: 126 E. OLYMPIA AVENUE, SUITE 304  
City-St-Zip: PUNTA GORDA, FL 33950

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: KEVIN C. SHIRLEY

OWNE

02/10/2006

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