

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000019109

Entity Name: PRO 5, LLC

FILED
Apr 29, 2006
Secretary of State

Current Principal Place of Business:

3819 MURRELL ROAD
SUITE E
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

Current Mailing Address:

3819 MURRELL ROAD
SUITE E
ROCKLEDGE, FL 32955 US

New Mailing Address:

FEI Number: 20-2410320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAFF, JAMES A
3819 MURRELL ROAD
SUITE E
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MRGM () Delete
Name: NAFF, JAMES A
Address: 3819 MURRELL ROAD, SUITE E
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MRGM (X) Change () Addition
Name: NAFF, JAMES A
Address: 3819 MURRELL ROAD, SUITE E
City-St-Zip: ROCKLEDGE, FL 329554752 US

Title: MGRM () Change (X) Addition
Name: CHAMBERS, EDWARD F
Address: 3819 MURRELL ROAD, SUITE E
City-St-Zip: ROCKLEDGE, FL 329554752 US

Title: MGRM () Change (X) Addition
Name: SHROLL, EDITH A
Address: 3819 MURRELL ROAD, SUITE E
City-St-Zip: ROCKLEDGE, FL 329554752 US

Title: MGRM () Change (X) Addition
Name: MIDWOOD, TWILA D
Address: 3819 MURRELL ROAD, SUITE E
City-St-Zip: ROCKLEDGE, FL 329554752 US

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: EDWARD CHAMBERS

MGRM

04/29/2006

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