

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000023035

FILED  
May 01, 2006  
Secretary of State

Entity Name: EM & EL, LLC

**Current Principal Place of Business:**

3310 HAMLET DRIVE, #1  
NAPLES, FL 34105

**New Principal Place of Business:**

730 PINE CT.  
NAPLES, FL 34102

**Current Mailing Address:**

3310 HAMLET DRIVE, #1  
NAPLES, FL 34105

**New Mailing Address:**

730 PINE CT.  
NAPLES, FL 34102

FEI Number: 20-2466950      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:**

BRINKMAN, LINDA C  
4001 TAMIAMI TRAIL NORTH, SUITE 300  
NAPLES, FL 34103      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:            MGR            ( ) Delete  
Name:            LAPHAM, CHUCK  
Address:        3310 HAMLET DRIVE, #1  
City-St-Zip:    NAPLES, FL 34105

**ADDITIONS/CHANGES:**

Title:            MGR            (X) Change ( ) Addition  
Name:            LAPHAM, CHUCK  
Address:        730 PINE CT.  
City-St-Zip:    NAPLES, FL 34102

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: CHUCK LAPHAM

MGR

05/01/2006

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