

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000033459

**FILED**  
**May 12, 2006**  
**Secretary of State**

**Entity Name:** ROBERT ROTHENBERG, LLC

**Current Principal Place of Business:**

1715 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33803

**New Principal Place of Business:**

1715 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33803 PK

**Current Mailing Address:**

1715 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33803

**New Mailing Address:**

8010 ASHLEY POINTE DRIVE  
LAKELAND, FL 33810 PK

**FEI Number:** 38-3729164      **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:**

ROTHENBERG, ROBERT  
1715 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33803 US

**Name and Address of New Registered Agent:**

ROTHENBERG, ROBERT  
8010 ASHLEY POINTE DRIVE  
LAKELAND, FL 33810 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: ROBERT ROTHENBERG

05/12/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title: MR ( ) Change (X) Addition  
Name: ROTHENBERG, ROBERT MR  
Address: 8010 ASHLEY POINTE DR  
City-St-Zip: LAKELAND, FL 33810 PK

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: ROBERT ROTHENBERG

MR

05/12/2006

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