

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037694

Entity Name: JOSHUA COLES L.L.C.

FILED  
May 01, 2006  
Secretary of State

**Current Principal Place of Business:**

5604 TWIN PALMS RD.  
FRUITLAND PARK, FL 34731

**New Principal Place of Business:**

**Current Mailing Address:**

5604 TWIN PALMS RD.  
FRUITLAND PARK, FL 34731

**New Mailing Address:**

820 FLATWOODS RD  
APT. 6  
LEESBURG, FL 34748

FEI Number: 22-3913120      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:**

COLES, JOSHUA D  
5604 TWIN PALMS RD.  
FRUITLAND PARK, FL 34731      US

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

COLES, JOSHUA D  
820 FLATWOODS  
APT. 6  
LEESBURG, FL 34731      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: JOSHUA COLES

05/01/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title: LLC ( ) Change (X) Addition  
Name: COLES, JOSHUA D  
Address: 820 FLATWOODS RD.  
City-St-Zip: LEESBURG, FL 34748

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: JOSHUA COLES

LLC

05/01/2006

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