

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000042437

**FILED**  
**Jan 10, 2006**  
**Secretary of State**

**Entity Name:** NORLEANS, DUAN AND SONS, LLC

**Current Principal Place of Business:**

8739 PASEO DE VALENCIA STREET  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

8739 PASEO DE VALENCIA STREET  
FORT MYERS, FL 33908

**New Mailing Address:**

**FEI Number:** 20-2765324

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KYLE, KEVIN A  
1520 ROYAL PALM SQUARE BOULEVARD, STE. 320  
FORT MYERS, FL 33919 US

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

NORLEANS, MARK X  
8739 PASEO DE VALENCIA STREET  
FORT MYERS, FL 33908 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: MARK X. NORLEANS

01/10/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: NORLEANS, MARK X  
Address: 8739 PASEO DE VALENCIA STREET  
City-St-Zip: FORT MYERS, FL 33908

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARK X. NORLEANS

MGR

01/10/2006

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