

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045865

FILED
Sep 05, 2006
Secretary of State

Entity Name: LENTZ & DODD LLC

Current Principal Place of Business:

635 NE 1ST ST.
GAINESVILLE, FL 32601 US

New Principal Place of Business:

Current Mailing Address:

635 NE 1ST ST.
GAINESVILLE, FL 32601 US

New Mailing Address:

FEI Number: 20-2989957 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:

LENTZ, FRANKLIN K JR.
635 NE 1ST.
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

FRANKLIN, BARBARA J
635 NE 1ST.
GAINESVILLE, FL 32601 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: BARBARA J FRANKLIN

09/05/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LENTZ, FRANKLIN K JR.
Address: 635 NE 1ST ST.
City-St-Zip: GAINESVILLE, FL 32601 US

Title: MGRM () Delete
Name: DODD, CHRISTOPHER W
Address: 635 NE 1ST ST.
City-St-Zip: GAINESVILLE, FL 32601 US

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

ADDITIONS/CHANGES:

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

Title: MGMR (X) Change () Addition
Name: DODD, CHRISTOPHER W
Address: 635 NE 1ST ST.
City-St-Zip: GAINESVILLE, FL 32601 US

Title: MGMR () Change (X) Addition
Name: FRANKLIN, BARBARA J
Address: 635 NE 1ST STREET
City-St-Zip: GAINESVILLE, FL 32601 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: BARBARA J FRANKLIN

MRS

09/05/2006

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