

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000046195

Entity Name: F & A HOLDINGS, L.L.C.

FILED  
Mar 06, 2006  
Secretary of State

**Current Principal Place of Business:**

117 KEY HAVEN ROAD  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

117 KEY HAVEN ROAD  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WOLFE, HAROLD E JR. ESQ  
2300 PALM BEACH LAKES BLVD.  
EXECUTIVE CENTRE, SUITE 302  
WEST PALM BEACH, FL 33409 US

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

RAMSINGH, FRANK R  
117 KEY HAVEN RD.  
KEY WEST, FL 33040 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: FRANK RAMSINGH

03/06/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RAMSINGH, FRANK R  
Address: 117 KEY HAVEN ROAD  
City-St-Zip: KEY WEST, FL 33040

Title: MGR ( ) Delete  
Name: RAMSINGH, ANA  
Address: 117 KEY HAVEN ROAD  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES:**

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

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: FRANK RAMSINGH

MGR

03/06/2006

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