

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000049328

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: DRAKE & DRAKE, CHARTERED

**Current Principal Place of Business:**

6 FAIRFIELD BLVD., SUITE 6  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

6 FAIRFIELD BLVD., SUITE 7  
PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:**

P.O. BOX 3439  
PONTE VEDRA BEACH, FL 320043439

**New Mailing Address:**

FEI Number: 52-6848928      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DRAKE, DAVID A  
6 FAIRFIELD BLVD., SUITE 6  
PONTE VEDRA BEACH, FL 32082      US

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

DRAKE, DAVID A  
6 FAIRFIELD BLVD.  
SUITE 7  
PONTE VEDRA BEACH, FL 32082      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: \_\_\_\_\_

04/25/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: DRAKE, DAVID A  
Address: 6 FAIRFIELD BLVD, SUITE 7  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: /S/ DAVID A. DRAKE

MGRM

04/25/2006

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