

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000054297

Entity Name: BILL NAVARRA, LLC

FILED  
Apr 28, 2006  
Secretary of State

**Current Principal Place of Business:**

224 CHIPPEWA CIRCLE  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

224 CHIPPEWA CIRCLE  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 20-2927835

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NAVARRA, WILLIAM B  
224 CHIPPEWA CIRCLE  
ORMOND BEACH, FL 32174 US

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

NAVARRA, WILLIAM  
224 CHIPPEWA CIRCLE  
ORMOND BEACH, FL 32174 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: WILLIAM NAVARRA

04/28/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: NAVARRA, WILLIAM B  
Address: 224 CHIPPEWA CIR  
City-St-Zip: ORMOND BEACH, FL 32174

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: NAVARRA, WILLIAM  
Address: 224 CHIPPEWA CIR  
City-St-Zip: ORMOND BEACH, FL 32174

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: WILLIAM NAVARRA

MGRM

04/28/2006

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