

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000057467

**FILED**  
**Aug 08, 2006**  
**Secretary of State**

**Entity Name:** ROSEANNE QUILTING ARTS, LLC

**Current Principal Place of Business:**

18941 SW 99TH STREET  
DUNNELLON, FL 34432

**New Principal Place of Business:**

7218 N. FREEPORT CIRCLE  
CITRUS SPRINGS, FL 34433

**Current Mailing Address:**

18941 SW 99TH STREET  
DUNNELLON, FL 34432

**New Mailing Address:**

7218 N. FREEPORT CIRCLE  
CITRUS SPRINGS, FL 34434

**FEI Number:** 32-0151957      **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:**

BARNES, ROSEMARY F  
18941 SW 99TH STREET  
DUNNELLON, FL 34432      US

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

BARNES, ROSEMARY F  
7218 N. FREEPORT CIRCLE  
CITRUS SPRINGS, FL 34434      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: \_\_\_\_\_

08/08/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title:            MGR            ( ) Delete  
Name:            BARNES, ROSEMARY F  
Address:        18941 SW 99TH STREET  
City-St-Zip:    DUNNELLON, FL 34432

**ADDITIONS/CHANGES:**

Title:            MGR            (X) Change ( ) Addition  
Name:            BARNES, ROSEMARY F  
Address:        7218 N. FREEPORT CIRCLE  
City-St-Zip:    CITRUS SPRINGS, FL 34434

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: ROSEMARY BARNES

MGR

08/08/2006

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