

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000061454

FILED
Mar 14, 2006
Secretary of State

Entity Name: MADISON ANTIQUES MARKET & INTERIORS, LLC

Current Principal Place of Business:

213 RANGE STREET
MADISON, FL

New Principal Place of Business:

197 SW RANGE AVE
MADISON, FL 32340

Current Mailing Address:

213 RANGE STREET
MADISON, FL

New Mailing Address:

PO BOX 997
MADISON, FL 32341

FEI Number: 20-4483552

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

W. BARTLETT SCOVILL, P.A.
1605 MAIN STREET, SUITE 912
SARASOTA, FL US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: POIRE, CINDY
Address: 213 RANGE STREET
City-St-Zip: MADISON, FL

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: POIRE, CINDY
Address: 197 SW RANGE AVE
City-St-Zip: MADISON, FL 32340

Title: MGRM () Change (X) Addition
Name: ALDAY, BOND
Address: 279 SW ALASKA WAY
City-St-Zip: GREENVILLE, FL 32333

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: CINDY POIRE

MGRM

03/14/2006

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