2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2006
Secretary of State

DOCUMENT# L05000062021

Entity Name: DUANE, L.L.C.

Current Principal Place of Business:

15 DUANE DRIVE
NORTH REDDING, MA 10864

New Principal Place of Business:

15 DUANE DRIVE
NORTH READING, MA 10864

Current Mailing Address:

15 DUANE DRIVE
NORTH REDDING, MA 10864

New Mailing Address:

15 DUANE DRIVE
NORTH READING, MA 10864

FEI Number: 51-0561520 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHARLES, DANA F ESQ.
C/O DANA F. CHARLES, P.A.
2799 N.W. BOCA RATON BLVD., #113
BOCA RATON, FL 33431 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: GALLOTTO, LINA
Address: 15 DUANE DRIVE
City-St-Zip: NORTH REDDING, MA 10864

Title: MGRM ( ) Delete
Name: GALLOTTO, OTTAVIO
Address: 15 DUANE DRIVE
City-St-Zip: NORTH REDDING, MA 10864

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: GALLOTTO, LINA
Address: 15 DUANE DRIVE
City-St-Zip: NORTH READING, MA 10864

Title: MGRM (X) Change ( ) Addition
Name: GALLOTTO, OTTAVIO
Address: 15 DUANE DRIVE
City-St-Zip: NORTH READING, MA 10864

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: LINA GALLOTTO MGR 04/25/2006

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