

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000075904

FILED  
Jul 02, 2006  
Secretary of State

**Entity Name:** TIMOTHY E. MOFFITT, ESQ., LLC.

**Current Principal Place of Business:**

2521 ESTEY AVE.  
D-4  
NAPLES, FL 34104

**New Principal Place of Business:**

2340 STANFORD CT.  
NAPLES, FL 34112

**Current Mailing Address:**

2521 ESTEY AVE.  
D-4  
NAPLES, FL 34104

**New Mailing Address:**

2340 STANFORD CT.  
NAPLES, FL 34112

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

MOFFITT, TIMOTHY E  
2521 ESTEY AVE.  
D-4  
NAPLES, FL 34104 US

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

MOFFITT, TIMOTHY E  
2340 STANFORD CT.  
NAPLES, FL 34112 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:

07/02/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MOFFITT, TIMOTHY E  
Address: 2521 ESTEY AVE., D-4  
City-St-Zip: NAPLES, FL 34104

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MOFFITT, TIMOTHY E  
Address: 2340 STANFORD CT.  
City-St-Zip: NAPLES, FL 34112

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: TIM MOFFITT

MNGR

07/02/2006

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