

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000078004

FILED
Aug 07, 2006
Secretary of State

Entity Name: MAGUIRE, LLC

Current Principal Place of Business:

22755 SOUTH WEST 66TH AVE.
BUILDING #6, APT. 108
BOCA RATON, FL 33428

New Principal Place of Business:

3649A WASH ROAD
LAKEWORTH, FL 33467 US

Current Mailing Address:

22755 SOUTH WEST 66TH AVE.
BUILDING #6, APT. 108
BOCA RATON, FL 33428

New Mailing Address:

215 CHELSEA STREET
STATEN ISLAND, NY 10307 US

FEI Number: 20-5301955 **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:

MAGUIRE, WILLIAM
22755 SOUTH WEST 66TH AVE.
BUILDING #6, APT. 108
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

MAGUIRE, WILLIAM
3649A WASH ROAD
LAKEWORTH, FL 33467 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 MAGUIRE

08/07/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MAGUIRE, WILLIAM
Address: 22755 SOUTH WEST 66TH AVE.
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MAGUIRE, WILLIAM
Address: 3649A WASH ROAD
City-St-Zip: LAKEWORTH, FL 33467 US

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 MAGUIRE

MGRM

08/07/2006

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