

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000089698

**FILED**  
**May 01, 2006**  
**Secretary of State**

**Entity Name:** MICHELLE R. GOODSPEED LLC

**Current Principal Place of Business:**

1007 SANDYRUN  
JUPITER, FL 33478

**New Principal Place of Business:**

10075 SANDY RUN  
JUPITER, FL 33478

**Current Mailing Address:**

1007 SANDYRUN  
JUPITER, FL 33478

**New Mailing Address:**

10075 SANDY RUN  
JUPITER, FL 33478

**FEI Number:** 20-3513810      **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:**

GOODSPEED, MICHELLE R  
1007 SANDYRUN  
JUPITER, FL 33478      US

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

GOODSPEED, MICHELLE R  
10075 SANDY RUN  
JUPITER, FL 33478      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:

05/01/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: GOODSPELL, MICHELLE R  
Address: 1007 SANDY RUN  
City-St-Zip: JUNIPER, FL 33478

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: GOODSPELL, MICHELLE R  
Address: 10075 SANDY RUN  
City-St-Zip: JUPITER, FL 33478

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: MICHELLE R. GOODSPEED

MGR

05/01/2006

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