

# **2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000094154

**FILED**  
**Aug 12, 2006**  
**Secretary of State**

**Entity Name:** CRIMALDI AND ASSOCIATES, LLC

**Current Principal Place of Business:**

10000 ARCOS AVE.  
101  
ESTERO, FL 33928

**New Principal Place of Business:**

10200 HERITAGE BAY BLVD S  
201  
NAPLES, FL 34120

**Current Mailing Address:**

PO BOX 1096  
ESTERO, FL 33928

**New Mailing Address:**

**FEI Number:** 05-0627687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CRIMALDI, JOE  
10115 VILLAGIO PALMS WAY  
201  
ESTERO, FL 33928 US

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

HAND, ALISA  
10115 VILLAGIO PALMS WAY  
201  
ESTERO, FL 33928 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: ALISA HAND

08/12/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HAND, ALISA  
Address: 10115 VILLAGIO PALMS WAY #201  
City-St-Zip: ESTERO, FL 33928

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALISA HAND

MGR

08/12/2006

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