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

## **DOCUMENT #L05000097858**

1. Entity Name
GORDON ENGINEERING AND CONSULTING SERVICES,



**FILED** Apr 17, 2006 8:00 am Secretary of State 04-17-2006 90042 036 \*\*\*\*55.00

L.L.C.				CS C	! :				
Principal Place of Business 12472 LAKE UNDERHILL RD #133 ORLANDO, FL 32828 US		Mailing Address 12472 LAKE UNDERHILL RD #133 ORLANDO, FL 32828 US							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			2440000				
City & State		City & State			04112006 4. FEI Numbe	Chg-LLC	CR2E0	B3 (11/05)	plied For I
					4. 7 CI NUMBE			No	t Applicable
Zip	Country	Zip	Country	untry		of Status Desired	×	\$5.00 Add Fee Required	itional
6. Name and Address of Current		Registered Agent Name			7. Name and	Address of New F	Registered A	gent	
	STEVEN C			dens /	(P.O. Box Number is Not Acceptable)				
639 TUTEI ORLANDO	N FRAIL ), FL 32828	Street Addres			P.O. BOX NUMBE	er is Not Acceptable			
			City		•		FL	Zip Code	3
8. 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. I am familiar with, and accept									and accept
the obligations of registered agent.									
SIGNATURE									
Filing Fee is \$50.00 Due by May 1, 2006							ke check pa a Departme		•
9.	MANAGING MEMBER	-	10.			ADDITIONS	/CHANGES		
NAME STREET ADDRESS CITY-ST-ZIP	MGRM GORDON, STEVEN C 12472 LAKE UNDERHILL RD #13 ORLANDO, FL 32828	□ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				•	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP					☐ Change	Addition
	certify that the information supplied with	this filing does not quality for th	I.,	ntained	in Chanter 110	Florida Statutan 1	further certific	that the info	rmation

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

STEVEN C. GORDON 12 APR 2006
KINING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF