


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 10, 2006 8:00 am
Secretary of State

01-25-2006 90048 026 ****50.00

f/k/a

DOCUMENT # L05000098104					
1. Entity Name CYNTHIA BAILES COUNSELING SERVICES, PLLC					
Principal Place of Business 6424 PINE CASTLE BLVD. ORLANDO, FL 32809			Mailing Address 6424 PINE CASTLE BLVD. ORLANDO, FL 32809		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 43-2089467	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent DENNY, CYNTHIA B 6424 PINE CASTLE BLVD. ORLANDO, FL 32809			7. Name and Address of New Registered Agent Name Cynthia Bailes Street Address (P.O. Box Number is Not Acceptable) 6424 Pine Castle Blvd. Orlando, Florida 32809 City Orlando FL 32809		
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 the obligations of registered agent. SIGNATURE <i>Cynthia B. Denny</i> Formerly Known AS Cynthia B. Denny <i>Cynthia B. Denny</i> 1-18-06 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2006			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DENNY, CYNTHIA B 6424 PINE CASTLE BLVD. ORLANDO, FL 32809 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BAILES, CYNTHIA 6424 Pine Castle Blvd. Orlando, FL 32809 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. 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. SIGNATURE: <i>Cynthia Bailes</i> CYNTHIA BAILES 1-18-06 407-222-7716 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					

30002128



01182006 Chg-LLC CR2E083 (11/05)



ATTACHMENT
30002128

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2006

CYNTHIA BAILES DENNY COUNSELING SERVICES, PLLC
6424 PINE CASTLE BLVD.
ORLANDO, FL 32809

Subject: *Cynthia Bailes Counseling Services, PLLC*
FKA CYNTHIA BAILES DENNY COUNSELING SERVICES, PLLC

Reference Number: **L05000098104**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE

ANNUAL REPORTS SECTION

43-2089467