

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000101546

FILED  
Jul 07, 2006  
Secretary of State

**Entity Name:** DREAM CATCHERS QUILTING LLC

**Current Principal Place of Business:**

864 ROYALWOOD LANE  
OVIEDO, FL 32765 US

**New Principal Place of Business:**

**Current Mailing Address:**

864 ROYALWOOD LANE  
OVIEDO, FL 32765 US

**New Mailing Address:**

FEI Number: 20-3622207      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:**

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

WAITE, TIMOTHY G  
864 ROYALWOOD LANE  
OVIEDO, FL 32765 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WAITE, KIMBERLY A  
Address: 864 ROYALWOOD LANE  
City-St-Zip: OVIEDO, FL 32765 US

**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: KIMBERLY A. WAITE

MRS.

07/07/2006

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