

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000104399

Entity Name: FLORIDA RADON LLC

FILED  
Sep 13, 2006  
Secretary of State

**Current Principal Place of Business:**

C/O RALPH GAROFALO  
201 QUAIL FOREST BLVD., #304  
NAPLES, FL 34105

**New Principal Place of Business:**

**Current Mailing Address:**

C/O RALPH GAROFALO  
201 QUAIL FOREST BLVD., #304  
NAPLES, FL 34105

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) 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:**

FLORIDA FILING & SEARCH SERVICES, INC.  
1333 NORTH DUVAL STREET  
TALLAHASSEE, FL 32303 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: GAROFALO, RALPH  
Address: 201 QUAIL FOREST BLVD., #304  
City-St-Zip: NAPLES, FL 34105

**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: RALPH GAROFALO

PRES

09/13/2006

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