

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000107781

Entity Name: ROMAC, LLC

FILED  
Jul 05, 2006  
Secretary of State

## Current Principal Place of Business:

1005 W. INDIANTOWN ROAD, SUITE 101  
JUPITER, FL 33458

## New Principal Place of Business:

1005 W. INDIANTOWN ROAD,  
SUITE 101  
JUPITER, FL 33458

## Current Mailing Address:

1005 W. INDIANTOWN ROAD, SUITE 101  
JUPITER, FL 33458

## New Mailing Address:

1005 W. INDIANTOWN ROAD,  
SUITE 101  
JUPITER, FL 33458

FEI Number: 86-1151123      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:

MCCABE, ED  
1005 W. INDIANTOWN ROAD, SUITE 101  
JUPITER, FL 33458      US

## Name and Address of New Registered Agent:

MCCABE, ED R  
1005 W. INDIANTOWN ROAD  
SUITE 101  
JUPITER, FL 33458      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: ED MCCABE

07/05/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: MCCABE, ED  
Address: 1005 W. INDIANTOWN ROAD, SUITE 101  
City-St-Zip: JUPITER, FL 33458

Title: MGR ( ) Delete  
Name: ROSEN, PETE  
Address: 1005 W. INDIANTOWN ROAD, SUITE 101  
City-St-Zip: JUPITER, FL 33458

Title: MGR ( ) Delete  
Name: SKILLINGS, GARY  
Address: 8817 S.E. COMPASS ISLAND WAY  
City-St-Zip: JUPITER, FL 33458

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: MCCABE, ED R  
Address: 1005 W. INDIANTOWN ROAD, SUITE 101  
City-St-Zip: JUPITER, FL 33458

Title: MGR (X) Change ( ) Addition  
Name: ROSEN, PETER  
Address: 1005 W. INDIANTOWN ROAD, SUITE 101  
City-St-Zip: JUPITER, FL 33458

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: EDWARD R. MCCABE

MGR

07/05/2006

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