FILED
Feb 15, 2006 8:00 am
Secretary of State
02-15-2006 90129 022 ****50.00

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000107863

1. Entity Name
PRIVILEGED BUSINESS CONSULTING, LLC

Principal Place of Business	Mailing Address
3320 ROSINKA COURT NAPLES, FL 34112	3320 ROSINKA COURT NAPLES, FL 34112

01112006 Chg-LLC CR2E083 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number SS# 085-30-1294 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KELLY, CHARLES M JR. 2640 GOLDEN GATE PARKWAY, SUITE 305 NAPLES, FL 34105	Kelly, Charles M Jr. Kelly, Passidomo, Alba & Cassner, LLP 2390 Tamiami Trail North Suite 204 Naples, FL 34103

8. The above named entity submits this statement for the purpose of changing its regis the obligations of registered agent.

SIGNATURE Charles M Kelly Jr 11 January 2006
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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 GREENSPAN, SHEILA 3320 ROSINKA COURT NAPLES, FL 34112	☐ 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
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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: Sheila Greenspan 2/13/06 239-963-1008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #