

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000053043

FILED
Jul 11, 2007
Secretary of State

Entity Name: SNOOPZ PRIVATE INVESTIGATIONS, LLC

Current Principal Place of Business:

4280 SAN MARINO BLVD #305
WEST PALM BEACH, FL 33409

New Principal Place of Business:

18648 46TH COURT N
LOXAHATCHEE, FL 33470

Current Mailing Address:

4280 SAN MARINO BLVD #305
WEST PALM BEACH, FL 33409

New Mailing Address:

18648 46TH COURT N
LOXAHATCHEE, FL 33470

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

MILLICAN, SHANA
4280 SAN MARINO BLVD #305
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

BEDARD, SHANA M
18648 46TH COURT N
LOXAHATCHEE, FL 33470 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: SHANA M BEDARD

07/11/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MILLICAN, SHANA
Address: 4280 SAN MARINO BLVD #305
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BEDARD, SHANA M
Address: 18648 46TH COURT N
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify 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: SHANA M BEDARD

MGRM

07/11/2007

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