

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000107297

FILED
May 01, 2007
Secretary of State

Entity Name: AFFORDABLE ACCOUNTANTS LLC

Current Principal Place of Business:

118A SHENANDOAH AVENUE
LADY LAKE, FL 32159

New Principal Place of Business:

2468 US HWY 441/27-SUITE 202
FRUITLAND PARK, FL 34731

Current Mailing Address:

118A SHENANDOAH AVENUE
LADY LAKE, FL 32159

New Mailing Address:

2468 US HWY 441/27-SUITE 202
FRUITLAND PARK, FL 34731

FEI Number: 20-5829142 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:

COURTEMANCHE, MARIETTE A
118A SHENANDOAH AVENUE
LADY LAKE, FL 32159 US

Name and Address of New Registered Agent:

COURTEMANCHE, MARIETTE A
2468 US HWY 441/27-SUITE 202
FRUITLAND PARK, FL 34731 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:

05/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: COURTEMANCHE, MARIETTE A
Address: 118A SHENANDOAH AVE
City-St-Zip: LADY LAKE, FL 32159

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: COURTEMANCHE, MARIETTE A
Address: 2468 US HWY 441/47 - SUITE 202
City-St-Zip: FRUITLAND PARK, FL 34731

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: MARIETTE A COURTEMANCHE

MGR

05/01/2007

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