

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000103331

**FILED**  
**Mar 18, 2010**  
**Secretary of State**

**Entity Name:** BLACK INK BOOKKEEPING, LLC

**Current Principal Place of Business:**

435 1ST ST SW  
NAPLES, FL 341172104

**New Principal Place of Business:**

**Current Mailing Address:**

7550 MISSION HILLS DRIVE  
SUITE 306, #27  
NAPLES, FL 34119

**New Mailing Address:**

PO BOX 111646  
NAPLES, FL 34108

**FEI Number:** 26-1413563

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DUGGAN, VIRGINIA E  
435 1ST ST SW  
NAPLES, FL 341172104 US

**Name and Address of New Registered Agent:**

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  
Name: DUGGAN, VIRGINIA E  
Address: 435 1ST ST SW  
City-St-Zip: NAPLES, FL 341172104

I hereby 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: VIRGINIA E. DUGGAN

MGRM

03/18/2010

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