

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 21, 2006  
Secretary of State**

DOCUMENT# L96000001023

Entity Name: JOHN J. COFFEY AND ASSOCIATES, L.C.

**Current Principal Place of Business:**

2729 OAKLAND AVENUE SOUTH  
LAKELAND, FL 33803

**New Principal Place of Business:**

**Current Mailing Address:**

2729 OAKLAND AVENUE SOUTH  
LAKELAND, FL 33803

**New Mailing Address:**

FEI Number: 59-3403467      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PALM, EUGENE M  
2729 OAKLAND AVENUE SOUTH  
LAKELAND, FL 33803      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      ( ) Delete  
Name: COFFEY, JOHN J  
Address: 803 HALLOWELL CIRCLE  
City-St-Zip: ORLANDO, FL 32828

Title: MGRM      ( ) Delete  
Name: PALM, EUGENE M  
Address: 1968 VISTA VIEW DRIVE  
City-St-Zip: LAKELAND, FL 33813

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOHN J. COFFEY

MGRM

04/21/2006

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