2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 03, 2007
Secretary of State

DOCUMENT# L97000000896

Entity Name: THE LAW OFFICES OF TIMOTHY M. DOUD, A LIMITED COMPANY

Current Principal Place of Business:

6133 US HWY 19 N
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1777
TARPON SPRING, FL 34688

New Mailing Address:

FEI Number: 59-3485062 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOUD, TIMOTHY M ESQ.
6133 US HWY 19 N,
NEW PORT RICHEY, FL 34652 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: DOUD, TIMOTHY M ESQ.
Address: 6133 US HWY 19 N
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: MGRM ( ) Delete
Name: DOUD, TIMOTHY M
Address: 6133 US HWY 19 N
City-St-Zip: NEW PORT RICHEY, FL 34652

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: TIMOTHY M DOUD MGRM 01/03/2007

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