

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000305

FILED
May 02, 2006
Secretary of State

Entity Name: MOHLER SWORDS LIMITED LIABILITY COMPANY

Current Principal Place of Business:

560 VILLAGE BLVD
250
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

560 VILLAGE BLVD
250
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-0887859 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:

MOHLER, TOM
560 VILLAGE BLVD., SUITE 250
BRANDYWINE II
WEST PALM BEACH, FL 33409 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: MGR () Delete
Name: MOHLER, TOM
Address: 525 SOUTH FLAGLER DRIVE, PF 3
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGR () Delete
Name: SWORDS, CIARAN
Address: 4601 NW 27TH AVENUE
City-St-Zip: BOCA RATON, FL 33434

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: TOM MOHLER

MGR

05/02/2006

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