

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000009067

**FILED**  
**Mar 19, 2006**  
**Secretary of State**

**Entity Name:** BODDORFF FAMILY #1, L.L.C.

**Current Principal Place of Business:**

C/O THOMAS C. BODDORFF  
P.O. BOX 858  
SUNAPEE, NH 03782

**New Principal Place of Business:**

C/O THOMAS C. BODDORFF  
1708 S. HARBOR LANE  
ANNAPOLIS, MD 21401

**Current Mailing Address:**

C/O THOMAS C. BODDORFF  
P.O. BOX 858  
SUNAPEE, NH 03782

**New Mailing Address:**

C/O THOMAS C. BODDORFF  
1708 S. HARBOR LANE  
ANNAPOLIS, MD 21401

**FEI Number:** 59-3614439

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DRTINA, RALPH  
1810 CHAROLLEE LN  
WINTER PARK, FL 32789 US

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

DRTINA, RALPH  
1810 CAROLLEE LN  
WINTER PARK, FL 32789 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:**

03/19/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR ( ) Delete  
**Name:** BODDORFF, THOMAS C  
**Address:** P.O. BOX 858  
**City-St-Zip:** SUNAPEE, NH 03782

**ADDITIONS/CHANGES:**

**Title:** MGR (X) Change ( ) Addition  
**Name:** BODDORFF, THOMAS C  
**Address:** 1708 S. HARBOR LANE  
**City-St-Zip:** ANNAPOLIS, MD 21401

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:** THOMAS C. BODDORFF

MGR

03/19/2006

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