

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001068

Entity Name: LAWLER ASSOCIATES, LLC

FILED
Apr 27, 2006
Secretary of State

Current Principal Place of Business:

55 CYPRESS NECK ROAD
LINCROFT, NJ 07738

New Principal Place of Business:

1151 BROAD ST.
SUITE118
SHREWSBURY, NJ 07702

Current Mailing Address:

55 CYPRESS NECK ROAD
LINCROFT, NJ 07738

New Mailing Address:

1151 BROAD ST.
SUITE 118
SHREWSBURY, NJ 07702

FEI Number: 43-2024339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301 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: LAWLER, ALICIA
Address: 55 CYPRESS NECK ROAD
City-St-Zip: LINCROFT, NJ 07738

ADDITIONS/CHANGES:

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

Title: MGRM () Delete
Name: LAWLER, PATRICK
Address: 55 CYPRESS NECK ROAD
City-St-Zip: LINCROFT, NJ 07738

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

I hereby certify that the information supplied with this filing does not qualify 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: ALICIA LAWLER

MGRM

04/27/2006

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