

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000094136

1. Entity Name
 CECO, LLC



Principal Place of Business
 POST OFFICE BOX 1641
 DESTIN, FL 32540

Mailing Address
 POST OFFICE BOX 1641
 DESTIN, FL 32540

DO NOT WRITE IN THIS SPACE



04272006No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2073211	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HAMILTON, CARL T JR.
 272 CHIPOLA COVE
 DESTIN, FL 32541

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8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Carl T. Hamilton
 Signature, typed or printed name of registered agent and his or her office.

MGRM

(NOTE: Registered Agent signature required when reinstating)

4-27-06

DATE

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HAMILTON, CARL T JR POST OFFICE BOX 1641 DESTIN, FL 32540
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 05/11/06-80121-025 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

Carl T. Hamilton
 MGRM

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-27-06

DATE

850-259-7979

Daytime Phone #