

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Aug 22, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # M04000004596  
 1. Entity Name  
 SUNBELT SUPPLY, LLC



Principal Place of Business Mailing Address  
 C/O CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND RD 1200 SOUTH PINE ISLAND RD  
 PLANTATION, FL 33324 PLANTATION, FL 33324

**DO NOT WRITE IN THIS SPACE**



08152005No Chg-LLC CR2E083 (10/03)

4. FEI Number 02-0604341 Applied For Not Applicable  
 5. Certificate of Status Desired  \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00 Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM VIRDEN, JOHN 2301 SOUTH FORBES DRIVE MONTGOMERY, AL 36110
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SUNBELT SUPPLY OF MS, LLC PO BOX 97025 PEARL, MS 39208
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 08/22/05-60007-001 50.00

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Joe Huff, Treasurer Date: 8/16/05 Daytime Phone #: 601-939-9128