

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000011083	
1. Entity Name GENE CARR ROOFING, LLC	

Principal Place of Business 879 AVANT ROAD CHIPLEY, FL 32428	Mailing Address 879 AVANT ROAD CHIPLEY, FL 32428
--	--

DO NOT WRITE IN THIS SPACE



01192006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-0710224	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CARR, GENE
 879 AVANT ROAD
 CHIPLEY, FL 32428

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

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

9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CARR, GENE 879 AVANT ROAD CHIPLEY, FL 32428	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

000000401808
 02/02/06-80057-019 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: 