2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M01000002085

1. Entity Name

ACE FABRICATION, L.L.C.

Pincipal Place of Business

3553 INDUSTRIAL PARK DR

BLDG A

MARIANNA, FL 32446

Mailing Address

3553 INDUSTRIAL PARK DR

BLDG A

DO NOT WRITE IN THIS SPACE

MARIANNA, FL 32446

FILED Jan 29, 2007 08:00 AM Secretary of State



01162007 No Chg-LLC

CR2E083 (11/05)

L			
4. FEI Number	Applied For	Applied I	or
38-3480037	Not Applicable	Not Appl	able
5. Certificate of Status Desired	\$5.00 Additional Fee Required		

6. Name and Address of Current Registered Agent

BONDURANT, FRANK E 4450 LAFAYETTE ST MARIANNA, FL 32446

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The above named entity submits this statement for the purpose of chang the obligations of registered agent.	ing its registered office or registered agent, or be	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE		
Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstaling)	DATE
* *		

Filing Fee is \$50.00 Due by May 1, 2007

000000607351 01/31/07-80031-025 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FULFORD, DOUG 3553 INDUSTRIAL PARK DR BLDG A MARIANNA, FL 32446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ASSELS, GARY P.O. BOX 370 EAR FALLS ONTARIO POV 1T0,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RICHARDS, MARK 3553 INDUSTRIAL PARK DR. MARIANNA, FL 32446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 1 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: __*\biggreet*

PED OR PRINTED NAME OF SIGNING MANAGING MEMB

DOUG FULFORD

JAN 26/07

850 482 414

Daytime Phone #