2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE:

Apr 10, 2006 08:00 AM Secretary of State DOCUMENT # L00000005578 BEAUCAT, LC. Principal Place of Business Mailing Address 7610 HWY 41 NORTH 7610 HWY 41 NORTH PALMETTO, FL 34221 PALMETTO, FL 34221 CR2E083 (11/05) 01252006 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1016736 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LYERLY, JAMES S 7610 US HWY 41 N DO NOT WRITE PALMETTO, FL 34221 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, typed or primed name of registered agent and titls if applicable STAD (NOTE: Registered Agent stonishing required when registered) UU0000499881 04/24/06-80048-004 50.00 Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. TIRE APER IT LYERLY, J.S. STREET ADDRESS 7810 US HWY 41 N CTTY-ST-ZP PALMETTO, FL. 34221 TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZP nne NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is find and accurate and that my signature shall have the same legal effect as if made under eath; that I am a managing member or manager of the limited flability company of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

R PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED

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