

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # L01000010319

1. Entity Name

L.V. DAVIS & SONS MANAGEMENT, L.L.C.



Principal Place of Business

4350 GARCON POINT RD.
BADGAD, FL 32530

Mailing Address

P.O. BOX 252
BADGAD, FL 32530



04072006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3731066

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

DAVIS, JOHN H
4350 GARCON POINT RD.
BADGAD, FL 32530

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME DAVIS, JOHN H
STREET ADDRESS 4350 GARCON POINT RD.
CITY-ST-ZIP BADGAD, FL 32530

TITLE MGR
NAME DAVIS, ALICE S
STREET ADDRESS 3922 WINDSOR CASTLE BLVD
CITY-ST-ZIP MILTON, FL 32583

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

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IN THIS SPACE**

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04/28/06-80032-011 50.00

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: John H. Davis

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

Date

Daytime Phone #

(850) 623-5390