

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # L01000020628

1. Entity Name
ACA CONSTRUCTION GROUP, LLC



Principal Place of Business

112 NE 12TH STREET
OCALA, FL 34470

Mailing Address

P.O. BOX 1926
OCALA, FL 34478-1926



01202006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3758070	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

GOODING, W. JAMES III, ESQ
7 EAST SILVER SPRINGS BLVD.
SUITE 500
OCALA, FL 34470

**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 NAME STREET ADDRESS CITY - ST - ZIP	MGR HUNTER, J. MARSHALL 1512 SW 5TH AVE, PO BOX 1688 OCALA, FL 344781688
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MANSFIELD, BARRY 112 NORTH EAST 12TH STREET OCALA, FL 34470
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR AUSLEY, STEVE 1107 E SILVER SPRINGS BLVD OCALA, FL 34470
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02/06/06-80039-015 55.00

**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: _____

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

Date

Daytime Phone #

1-25-06