


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 05, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000020048
 1. Entity Name
DEKLE DRYWALL L.L.C



Principal Place of Business 10312 103RD ST. JACKSONVILLE, FL 32210	Mailing Address 10312 103RD ST. JACKSONVILLE, FL 32210
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DO NOT WRITE IN THIS SPACE



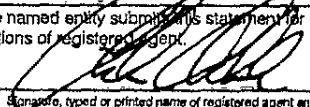
02162005No Chg-LLC CR2E083 (10/03)

4. FEI Number 74-3052956	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
DEKLE, ADRIAN
 10312 103RD ST.
 JACKSONVILLE, FL 32210

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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:  DATE: 2-20-05

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

Filing Fee is \$50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEKLE, ADRIAN 10312 103RD ST. JACKSONVILLE, FL 32210
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03/05/05-80032-015 55.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:  DATE: 2-20-05 DAYTIME PHONE #: 904-376-5018

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