


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90036 050 ****50.00

| | |
|---|---|
| DOCUMENT # L03000000727 1. Entity Name FLOWERS & WHITE, L.L.C. |  |
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|--|--|
| Principal Place of Business 1501 EAST PARK AVENUE TALLAHASSEE, FL 32301 US | Mailing Address 1501 EAST PARK AVENUE TALLAHASSEE, FL 32301 US |
|--|--|

DO NOT WRITE IN THIS SPACE



05012006 No Chg-LLC CR2E083 (11/05)

| | |
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| 4. FEI Number 16-1646010 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

FLOWERS, FRED H
1501 EAST PARK AVENUE
TALLAHASSEE, FL 32301

**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 | MGRM FLOWERS, FRED H 1501 EAST PARK AVE TALLAHASSEE, FL 32301 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM WHITE, LARRY K 1501 EAST PARK AVE TALLAHASSEE, FL 32301 |
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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: Fred H. Flowers 5-1-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #