


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000006621		
1. Entity Name NEWMANS BROTHERS CONSTRUCTION LLC		
Principal Place of Business 1726 FRANKFORT AVENUE # 3 PANAMA CITY, FL 32405 US	Mailing Address 1726 FRANKFORT AVENUE # 3 PANAMA CITY, FL 32405 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent NEWMANS, HOWARD E 1726 FRANKFORT AVENUE # 3 PANAMA CITY, FL 32405-US		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relinquishing)</small>		
Filing Fee is \$50.00 Due by May 1, 2006		
D. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NEWMANS, HOWARD E 8618 WOOD CIRCLE PANAMA CITY, FL 32404	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NEWMANS, WOODROW P 1119 NEW YORK AVENUE LYNN HAVEN, FL 32444	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 606, Florida Statutes. SIGNATURE: <i>Woodrow P. Newman</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small> 1/3/2006 (850) 763-1122 <small>Date Daytime Phone #</small>		

01032006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
46-0520361

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

U000000378646
01/09/06-80017-002 50.00