



2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90027 036 ****50.00

DOCUMENT # L03000041855 1. Entity Name AVALON EXPRESS, LLC																											
Principal Place of Business 117 RACETRACK RD NE FT WALTON BEACH, FL 32547			Mailing Address 117 RACETRACK RD NE FT WALTON BEACH, FL 32547																								
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																									
City & State Zip Country		City & State Zip Country		04242006 Chg-LLC CR2E083 (11/05)																							
4. FEI Number 20-0374890				Applied For <input type="checkbox"/> Not Applicable																							
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent SIMS, JACKIE L 751 GULF BLVD NAVARRE BEACH, FL 32566																							
7. Name and Address of New Registered Agent Name <u>Sims, Jackie L</u> Street Address (P.O. Box Number is Not Acceptable) <u>7510 Gulf Blvd</u> City <u>Navarre Beach</u> FL Zip Code <u>32566</u>				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 <u>Jackie L Sims</u> <u>Jackie L Sims</u> <u>4-23-06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>																							
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State		9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">TITLE</td> <td style="width:45%;">MGR</td> <td style="width:40%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>SIMS, LARRY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>7510 GULF BLVD</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>NAVARRE, FL 32566</td> <td></td> </tr> </table>		TITLE	MGR	<input type="checkbox"/> Delete	NAME	SIMS, LARRY		STREET ADDRESS	7510 GULF BLVD		CITY - ST - ZIP	NAVARRE, FL 32566											
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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: <u>Jackie L Sims</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				<u>4-23-06</u> <u>850-936-8291</u> <small>Date Daytime Phone #</small>																							