2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000043022

1. Entity Name

B & L FABRICATION & SALES L.L.C.

FILED Apr 11, 2007 08:00 Al Secretary of State

Principal Place of Business

487 GOLDKIST BLVD. LIVE OAK, FL 32064 US Mailing Address

16584 100TH PLACE LIVE OAK, FL 32060

US



04062007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	Applied Fo	r
20-0369208	Not Applica	able
5. Certificate of Status Desired	\$5.00 Additional	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MCCLELLAND, BILLY 16584 100TH PLACE LIVE OAK, FL 32060

DO NOT WRITE IN THIS SPACE

LIVE OAK	,FL 32060	IN 7	THIS SPACE
	named entity submits this statement for the purpose of changlions of registered agent.	I. ging its registered office or registered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2007		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR MCCLELLAND, BILLY 16584 100TH PLACE LIVE OAK, FL 32060	DO	U00000699604 04/19/07-80049-010 50.00 NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		IN T	THIS SPACE
CITY-ST-ZIP TITLE NAME- STREET ADDRESS		· ·	·

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

4-9-07 (384) 362-7429

ate Daytime Phone #