## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000043633

Entity Name: DOUBLE J DRYWALL "LLC"

FILED Apr 10, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

397 OSLO DR 5 FENWOOD LANE DELTONA, FL 32725 PALM COAST, FL 32137

Current Mailing Address: New Mailing Address:

397 OSLO DR 5 FENWOOD LANE DELTONA, FL 32725 PALM COAST, FL 32137

FEI Number: 20-0129937 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WHELAN, JAMES H SR.

397 OSLO DR

5 FENWOOD LANE

5 ALM COAST BLOOMS

DELTONA, FL 32725 US PALM COAST, FL 32137 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

ADDITIONS/CHANGES:

in the State of Florida.

SIGNATURE: JAMES H WHELAN SR. 04/10/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Fitle: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 WHELAN, JAMES H SR
 Name:
 WHELAN, JAMES H SR

 Address:
 397 OSLO DR
 Address:
 5 FENWOOD LANE

 City-St-Zip:
 DELTONA, FL 32725
 City-St-Zip:
 PALM COAST, FL 32137

Title: MGRM () Delete Title: MGRM (X) Change () Addition
Name: WHELAN, JOHN Name: WHELAN, JEFFREY
Address: 397 OSLO DR Address: 5 FFNWOOD LANF

 Address:
 397 OSLO DR
 Address:
 5 FENWOOD LANE

 City-St-Zip:
 DELTONA, FL 32725
 City-St-Zip:
 PALM COAST, FL 32137

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition Name: MEREDITH, RICHARD Name: MEREDITH, RICHARD

 Address:
 397 OSLO DR
 Address:
 5 FENWOOD LANE

 City-St-Zip:
 DELTONA, FL 32725
 City-St-Zip:
 PALM COAST, FL 32137

Title: ( ) Delete Title: MGRM ( ) Change (X) Addition

 Name:
 Name:
 WHELAN, JAMES H JR

 Address:
 Address:
 5 FENWOOD LANE

 City-St-Zip:
 City-St-Zip:
 PALM COAST, FL 32137

Title: ( ) Delete Title: MGRM ( ) Change (X) Addition

 Name:
 Name:
 WHELAN, JOHN

 Address:
 5 FENWOOD LANE

 City-St-Zip:
 City-St-Zip:
 PALM COAST, FL 32137

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JAMES H WHELAN SR. MGRM 04/10/2006