2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000044041

1. Entity Name

DOZIER HINES ELECTRIC, LLC



US

FILED Mar 23, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

16006 NW 28TH STREET GAINESVILLE, FL 32609

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16006 NW 28TH STREET GAINESVILLE, FL 32609

CR2E083 (11/05)

4. FEI Number 20-0389743

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HINES, DOZIER W 16006 NW 28TH STREET GAINESVILLE, FL 32609

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	love named entity submits this statement for the purpose of cha ligations of registered agent.	nging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATU	RE	(NOTE: Registered Apply signature required when religibility)	DATE
	Signature, typed or printed risking of registered agent and the it approachs.	140.5 Upplaced Marit and upplace and an assessment sound on all	
	Filing Fee is \$50.00 Due by May 1, 2006	=	000000478371 04708706-80003-806 50 .70
9.	MANAGING MEMBERS/MANAGERS		
THLE	MGRM		

HINES, DOZIER W NAME STITEET ADDRESS 16006 NW 28TH STREET CITY-ST-ZIP GAINESVILLE, FL 32609 TITLE NAME STREET ADDRESS CKTY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filling 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: Wasies W. Hines

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #