

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000044711

FILED
Jun 12, 2006
Secretary of State**Entity Name:** EDWARD DAVIS LLC**Current Principal Place of Business:**7965 MOBILE HWY.
PENSACOLA, FL 32526 US**New Principal Place of Business:****Current Mailing Address:**7965 MOBILE HWY.
PENSACOLA, FL 32526 US**New Mailing Address:****FEI Number:** 71-0955986**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DAVIS, EDWARD
7965 MOBILE HWY.
PENSACOLA, FL 32526 US**Name and Address of New Registered Agent:**

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.

SIGNATURE:_____
Electronic Signature of Registered Agent_____
Date**MANAGING MEMBERS/MANAGERS:**Title: MGRM () Delete
Name: DAVIS, EDWARD N
Address: 7965 MOBILE HWY.
City-St-Zip: PENSACOLA, FL 32526 USTitle: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: MEMB () Change (X) Addition
Name: JOHNSTON, CECIL G
Address: 40 PEN HAVEN DR
City-St-Zip: PENSACOLA, FL 32506Title: MEMB () Change (X) Addition
Name: DAVIS, ALFE J
Address: 7965 MOBILE HWY
City-St-Zip: PENSACOLA, FL 32526

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: EDWARD DAVIS

MGRM

06/12/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date