

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

DOCUMENT # L03000045664

1. Entity Name
 BEN BURCH WELDING SERVICE LLC



Principal Place of Business 17677 MAHAN DR. TALLAHASSEE, FL 32309	Mailing Address 17677 MAHAN DR. TALLAHASSEE, FL 32309
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DO NOT WRITE IN THIS SPACE



03012006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 35-2219107	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BURCH, BEN F JR.
 17677 MAHAN DR.
 TALLAHASSEE, FL 32309

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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 Ben F. Burch Jr. DATE 3-1-06

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

**Filing Fee is \$50.00
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BURCH, BEN F JR. 17677 MAHAN DR. TALLAHASSEE, FL 32309
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 03/18/06-80033-022 50.00

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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: Ben F Burch Jr. DATE 3-1-06 DAYTIME PHONE # 850 468 6027

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