2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000046346

City-St-Zip: NEWBERRY, FL 32669

FILED May 30, 2006 Secretary of State

Entity Name: WOODY ROLAND CUSTOM CERAMIC TILE, LLC

| Current Principal Place of Business: | | New Principal Place o | New Principal Place of Business: | |
|--|---|---|-------------------------------------|--|
| P.O. BOX 6 NEWBERR | 91 Y, FL 32669 | | | |
| Current Ma | ailing Address: | New Mailing Address | : | |
| P.O. BOX 6 NEWBERR | 91 Y, FL 32669 | | | |
| FEI Number: | 59-2957450 FEI Number Applied For() e with s. 607.193(2)(b), F.S., the limited liability com | FEI Number Not Applicable() pany did not receive the prior notice. | Certificate of Status Desired () | |
| Name and | Address of Current Registered Agent: | Name and Address of | New Registered Agent: | |
| ROLAND, N PO BOX 69 1220 NW C NEWBERR | 91 | | | |
| The above in the State | named entity submits this statement for the poor of Florida. | urpose of changing its registered | office or registered agent, or both | |
| SIGNATUR | E: | | | |
| | Electronic Signature of Registered Age | nt | Date | |
| MANAGING MEMBERS/MANAGERS: | | ADDITIONS/CHANGES: | | |
| Title: Name: Address: | MGR () Delete ROLAND, JOHN W PO BOX 691 1220 NW CR 235 | Title: Name: Address: | () Change () Addition | |

City-St-Zip:

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: JOHN W. ROLAND MGR 05/30/2006