2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 26, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000046515

1. Entity Name
S & W TRUCKING, LLC

Principal Place of Business	Mailing Address
8036 WALT WILLIAMS ROAD LAKELAND, FL 33803	8036 WALT WILLIAMS ROAD LAKELAND, FL 33803

DO NOT WRITE IN THIS SPACE

01172006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-0411934
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

NICHOLS, SUSAN
8036 WALT WILLIAMS ROAD
LAKELAND, FL 33803

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	NICHOLS, JIMMY W
STREET ADDRESS	8036 WALT WILLIAMS ROAD
CITY-ST-ZIP	LAKELAND, FL 33803
TITLE	MGRM
NAME	NICHOLS, SUSAN
STREET ADDRESS	8036 WALT WILLIAMS ROAD
CITY-ST-ZIP	LAKELAND, FL 33803
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

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02/02/06-80077-020 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: _____ Date _____ Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE