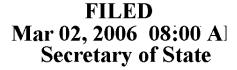
2006 LIMITED LIABILITY COMPANY

ANNUAL REPORT **DOCUMENT # L03000046812** DELBERT E. RIPPY, LLC Principal Place of Business Mailing Address 10422 HAZEL AVE 10422 HAZEL AVE HUDSON, FL 34669 HUDSON, FL 34669







DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01092006 No Chg-LLC CR2E083 (11/05) Applied For 4. FEI Number 20-1048353

Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

RIPPY, DELBERT E 10422 HAZEL AVE.

HUDSON, FL 34669

SIGNATURE:

DO NOT WRITE IN THIS SPACE

7eb27,2006

Daytme Phone #

				-
	named entity submits this statement for the purpose of char- lions of registered agent.	nging its registere	d office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
Signature Signature, typed or printed name of registered agent and this if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE
	iling Fee is \$50.00 ue by May 1, 2006	•	· · · · · · · · · · · · · · · · · · ·	
9.	MANAGING MEMBERS/MANAGERS			
NAME STREET ADDRESS CITY-ST-ZIP	MGR RIPPY, DELBERT E 10422 HAZEL AVE. HUDSON, FL 34669			UND000453378
RILE NAME STREET ADDRESS CITY-ST-ZIP		-		03/14/06-80017-024 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
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TTILE NAME STREET ADDRESS CITY-ST-ZIP			** 	
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.				

MERCOR AUTHORIZED REPRESENTATIVE