

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000048071	
1. Entity Name AL RAPER AIR CONDITIONING & HEATING, LLC	

Principal Place of Business 770-608 SUNDIAL CT. FT. WALTON BEACH FL 32548	Mailing Address P.O. BOX 2501 FT. WALTON BEACH FL 32549
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE	CR2E083 (10/05)
4. FEI Number 37-1479296	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent RAPER, EZRA A 770-608 SUNDIAL CT. FT. WALTON BEACH FL 32548	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 reissuing)	DATE
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FILE NOW!!! FEE IS \$50.00	
Make Check Payable to Florida Department of State	
Due By May 1, 2006	

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RAPER, EZRA A 770-608 SUNDIAL CT. FT. WALTON BEACH FL 32548	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	000000432363 02/23/06-80065-005 50.00	☐ Change ☐ Add
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 a limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: <i>Ezra A Raper</i>	2-10-06 850-243-4748
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