## 2006 LIMITED LIABILITY COMPANY

CITY-ST-ZIP TITLE NAME STREET ADDRESS C\$2-ST-21P

## Jun 02, 2006 8:00 am **Secretary of State ANNUAL REPORT** 06-02-2006 90109 015 \*\*\*150.00 DOCUMENT # L03000050752 1. Entity Name JOSEPH GREEN PLASTERING LLC. Principal Place of Business Mailing Address PO BOX 2216 12125 NW 148TH PL. 20046986 ALACHUA, FL 32616 ALACHUA, FL 32615 US CR2E083 (11/05) 04182006 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 37-1480805 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GREEN, JOSEPH G DO NOT WRITE 12125 NW 148TH PLACE ALACHUA, FL 32615 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGR TIME GREEN, JOSEPH Ğ NAME STREET ADDRESS 12125 NW 148TH PLACE CHY-SI-7IP ALACHUA, FL 32615 MGR THLE NAME GREEN, VALERIE N 12125 NW 148TH PLACE STREET ADDRESS CITY-ST-ZIP ALACHUA, FL 32615 HILE NAME STREET ADDRESS DO NOT WRITE CITY-S1-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP HILE STREET ADDRESS

**FILED** 

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: G MEMBER, OR AUTHORIZED REPRESENTATIVE