## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 24, 2006 8:00 am Secretary of State

DOCUMENT # L03000051184  1. Entity Name DREW'S TRACTOR SERVICE, L.L.C.					04-24-2006 90046 025 ****55.00					
Principal Place	AVE EAST	Mailing Address 6810 36TH AVE EAST	l		9	UUJIOO				
BRADENTON	, FL 34208 US	BRADENTON, FL 34208	US	٠.			1 <b>2</b> 111 <b>8 7 18</b> 2 <b>8 118</b> 1 111	ITI MEDI IZIN DI	1201 fil t201	
2. Principal Place of Business		3. Mailing Address AM AVE EAS		IST						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			01092006	Chg-LLC	CR2E0	83 (11/05)		
City & State		BRADENTON, FO		•	4. FEI Numb 75-314				pplied For at Applicable	
Zip	Country	zip 34208	Country		5. Certificate	of Status Desired		\$5.00 Add		
	6. Name and Address of Current	Registered Agent	Namo		7. Name and	Address of New	Registered /	\gent		
MEISSNER, GREGORY C 1111 3RD AVENUE WEST				Name Street Address (P.O. Box Number is Not Acceptable)						
SUITE 150 BRADENTON, FL 34205										
			City				FL	Zip Cod	е	
8. The above the obligat	named entity submits this statement for ions of registered agent.	the purpose of changing its reg	istered office o	r registere	ed agent, or bo	th, in the State of F		amiliar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent a	not title if anninghia (NIOTE: Bar								
		ino pire il appressore. (NOTE. 119)	Braneved without sidust	ure required	wnen reinstating)		DATE			
Fi D:	ling Fee is \$50.00 ue by May 1, 2006	in special in the spe	gistered Ageni signat	ure required	when reinstating)		ake check p	•	e	
Di	ling Fee is \$50.00		10.	ure required	when reinstating)	Flori	ake check p	•	Đ	
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9. TITLE NAME STREET ADDRESS	ling Fee is \$50.00 ue by May 1, 2006 MANAGING MEMBE MGRM KING, DREW F 7011 32ND AVENUE EAST	RS/MANAGERS	10. TITLE NAME STREET ADDRESS	ma	ILING	Flori	ake check p da Departm S/CHANGES	Change		
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1. 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: SIGNATURE AND TYPED OR PRINTED NAM

GHING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

20-06 941920