


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 23, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L03000052715**

1. Entity Name  
**DANIEL L. MCNEELY CONSTRUCTION SERVICE L.L.C.**



Principal Place of Business  
**71 ELIZABETH ST.  
 CRAWFORDVILLE, FL 32327**

Mailing Address  
**71 ELIZABETH ST.  
 CRAWFORDVILLE, FL 32327**

**DO NOT WRITE IN THIS SPACE**



03152006No Chg-LLC CR2E083 (11/05)

4. FEI Number  
**16-1674117**

Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**MCNEELY, DANIEL L.  
 71 ELIZABETH ST.  
 CRAWFORDVILLE, FL 32327**

**DO NOT WRITE  
 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 *Daniel L. McNeely* *owner/manager* 3/21/06  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re/submitting) DATE

**Filing Fee is \$50.00  
 Due by May 1, 2006**

1100000478399  
 04/08/06-80004-009 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCNEELY, DANIEL L 71 ELIZABETH ST. CRAWFORDVILLE, FL 32327
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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: *Daniel L. McNeely* 3/21/06 850-926-3090  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #