## 2006 LIMITED LIABILITY COMPANY

## **FILED**

ANNUAL REPORT				Jan 17, 2006 08:00 Alv
DOCUMENT # L03000053253				Secretary of State
1. Entity Name BILL VANBURGER WOODWORKING, LLC				}
BILL VAIN	BORGER WOODWORK			
Principal Plac	e of Business	Mailing Address		
885 35TH C		1133 36TH AVE SW	±	
YEHU BEAU	1, FL 32968	VERO BEACH, FL 32968	-	
DO NOT WRITE IN THIS SPACE				01102006No Chg-LLC
			CE	4. FEI Number Applied For
				65-0053556 Not Applicable Scott Special Scott Special Scott Special Scott Special Spec
		the state of the s	<u> </u>	5. Certificate of Status Desired
<u></u>	6. Name and Address of Current	Registered Agent		The second secon
VANBURGER, WILLIAM		}	DO NOT WRITE	
1133 36TH AVE SW VERO BEACH, FL 32962		}	var.	
		1	IN THIS SPACE	
<b>[</b>		and the second of the second of	\ <u></u>	
	named entity submits this statement folions of registered agent.	or the purpose of changing its registere	ed office or registered	agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered age	n and title II applicable. NOTE Registe	oved Agent signature required	d when relocatelling) DATE
F.	iling Fee is \$50,00 ue by May 1, 2006		<u> </u>	ge <del>se</del> nt on the second
9.	MANAGING MEMB	ERS/MANAGERS		
TITLE NAME	MGRM VANBURGER, WILLIAM		1	
STREET ADDRESS	1133 36TH AVE SW		1	HAMAAAAA
CITY-ST-ZIP	VERO BEACH, FL 32962	<u> </u>		
TITLE NAME			· (	
STREET ADDRESS			ł	
CITY-ST-ZIP		<u> </u>	in.	
TITLE NAME			1	
STREET ADDRESS	}		1	DO NOT WRITE
CITY-ST- ZIP	<u></u>	<u> </u>		DO NOT WRITE
TITLE NAME	1		<b>§</b>	IN THIS SPACE
STREET ADDRESS			1	
CITY-ST-ZIP		<u></u>		(4.17)
TITLE NAME			J	
STREET ADDRESS	{		ł	
GITY-ST-ZIP		<u> </u>	<u>.</u>	The state of the s
TITLE NAME			<b>{</b>	

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I furt her 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 ma inager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS C17Y - S7 - ZP

URE: Wills Use Band on printed name of signing managing member, or authorized representative

1-12-06

772-562-0690

, Fr. Date