

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
May 10, 2006 8:00 am
Secretary of State

05-10-2006 90018 030 ****55.00

DOCUMENT # L03000053416

1. Entity Name

RUSSELL W. MCCLOUD SR. L.L.C.



Principal Place of Business

7460 TURTLE BROOK LANE
NEW PORT RICHEY FL 34655

Mailing Address

7460 TURTLE BROOK LANE
NEW PORT RICHEY FL 34655

2. Principal Place of Business

7460 Turtle brook LN,
Suite, Apt. #, etc.

3. Mailing Address

Same as above
Suite, Apt. #, etc.

City & State

New Port Richey, FL.

City & State

Same as above

4. FEI Number

59-3324011

Applied For

Not Applicable

5. Certificate of Status Desired

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\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCCLOUD, RUSSELL W SR.
7460 TURTLEBROOK LN
NEW PORT RICHEY FL 34655

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Russell W. McCloud Sr.

Russell W. McCloud

4-29-06

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State.
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME RUSSELL MCCLOUD SR, LLC
STREET ADDRESS 7460 TURTLEBROOK LAN
CITY-ST-ZIP NEW PORT RICHEY FL 34655

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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10. ADDITIONS/CHANGES

TITLE
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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 the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Russell W. McCloud Sr.

Russell W. McCloud

4-29-06 727-992-3255

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #