



2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 17, 2006 8:00 am
Secretary of State

08-17-2006 90044 024 ****50.00

DOCUMENT # L03000053507 1. Entity Name EVANS, DRYWALL, PAINT AND PLASTER, LLC																													
Principal Place of Business 431 SE 28TH LOOP MELROSE, FL 32666			Mailing Address 431 SE 28TH LOOP MELROSE, FL 32666																										
2. Principal Place of Business 232 Beach Dr Suite, Apt. #, etc. FLORAHOME City & State FL		3. Mailing Address 232 Beach Dr Suite, Apt. #, etc. FLORAHOME, FL City & State FL																											
Zip 32140		Country USA		08102006 Chg-LLC CR2E083 (11/05)																									
4. FEI Number 36-4545810		Applied For <input checked="" type="checkbox"/> Not Applicable																											
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent EVANS, ANTHONY C JR. 431 SE 28TH LOOP MELROSE, FL 32666																									
7. Name and Address of New Registered Agent Name EVANS ANTHONY C-JR Street Address (P.O. Box Number is Not Acceptable) 232 Beach Dr City FLORAHOME, FL FL 32140				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 <u>Anthony C. Evans Jr</u> DATE <u>8/15/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																									
Filing Fee is \$50.00 Due by September 6, 2006			Make check payable to Florida Department of State																										
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">TITLE</td> <td style="width:60%;">MGR</td> <td style="width:20%; text-align: right;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>EVANS, ANTHONY C JR.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>431 SE 28TH LOOP</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MELROSE, FL 32666</td> <td></td> </tr> </table>			TITLE	MGR	<input checked="" type="checkbox"/> Delete	NAME	EVANS, ANTHONY C JR.		STREET ADDRESS	431 SE 28TH LOOP		CITY-ST-ZIP	MELROSE, FL 32666		10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">TITLE</td> <td style="width:60%;">MGR</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>ANTHONY C. EVANS JR</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>232 Beach Dr</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>FLORAHOME FL 32140</td> <td></td> </tr> </table>			TITLE	MGR	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	ANTHONY C. EVANS JR		STREET ADDRESS	232 Beach Dr		CITY-ST-ZIP	FLORAHOME FL 32140	
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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: Anthony C. Evans Jr DATE: 8/15/06 DAYTIME PHONE: 352 283 9702

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