

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

04-17-2006 90053 014 ****50.00

DOCUMENT # L03000053964					
1. Entity Name SEAN'S LOADER SERVICES, LLC					
Principal Place of Business 106 N 4TH STREET DUNDEE, FL 33838 US			Mailing Address 106 N 4TH STREET DUNDEE, FL 33838 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	04122006 Chg-LLC CR2E083 (11/05)	
6. Name and Address of Current Registered Agent MALLOY, SEAN 106 N 4TH STREET DUNDEE, FL 33838				7. Name and Address of New Registered Agent Name: <u>Jessica Shaughnessy Malloy</u> Street Address (P.O. Box Number is Not Acceptable): <u>106 N. 4th Street</u> City: <u>Dundee</u> State: <u>FL</u> Zip Code: <u>33838</u>	
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>[Signature]</u> Signature, typed or printed name of registered agent and title if applicable.		<u>Jessica Shaughnessy Malloy</u> Registered Agent DATE: <u>4/14/06</u>			
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MALLOY, SEAN 106 4TH STREET DUNDEE, FL 33838	<input type="checkbox"/> Delete			
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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: <u>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		
Date: <u>4/14/06</u>			Daytime Phone #: <u>863-42-9197</u>		