


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L0300005403 1. Entity Name SUNCOAST SEAMLESS GUTTERS, LLC	
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Principal Place of Business 5349 FIRETHORN POINT BROOKSVILLE, FL 34609	Mailing Address 5349 FIRETHORN POINT BROOKSVILLE, FL 34609
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DO NOT WRITE IN THIS SPACE



07012006 No Chg-LLC CR2E083 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent BIRD, JAMES L III 5349 FIRETHORN POINT BROOKSVILLE, FL 34609

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)


Filing Fee is \$50.00
Due by September 6, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BIRD, JAMES L III 5349 FIRETHORN POINT BROOKSVILLE, FL 34609
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 07/06/06-80010-006 50.00

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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:  **7/1/06 3527998216**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #