

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 21, 2006 8:00 am
Secretary of State

08-21-2006 90128 029 ****50.00

DOCUMENT # L03000055558					
1. Entity Name ASPHALT MAINTENANCE LLC					
Principal Place of Business 307 EAST MAIN ST. DUNDEE, FL 33838			Mailing Address 307 EAST MAIN ST. DUNDEE, FL 33838		
2. Principal Place of Business 1364 Tindel Camp Rd. Suite, Apt. #, etc.		3. Mailing Address P.O. Box 247 Suite, Apt. #, etc.			
City & State Lake Wales, FL Zip: 33898 Country: USA		City & State Dundee, FL Zip: 33838 Country: USA		4. FEI Number 65-0968025	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CONROY, JOSEPH 307 EAST MAIN ST. DUNDEE, FL 33838			7. Name and Address of New Registered Agent Name: CONROY, Joseph Street Address (P.O. Box Number is Not Acceptable): 1364 Tindel Camp Rd. City: Lake Wales, FL Zip Code: 33898		
8. The above named entity submits this statement for the purpose of changing its registered office and/or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>Joseph Conroy</u> <u>Joseph Conroy</u> <u>8/17/06</u> <small>Signature, type 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			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CONROY, JOSEPH 307 EAST MAIN ST. DUNDEE, FL 33838	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CONROY, Joseph 1364 Tindel Camp Rd. Lake Wales, FL 33898	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM STRICKLAND, RANDY 307 EAST MAIN ST. DUNDEE, FL 33838	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM JUDY S. CONROY 1364 Tindel Camp Rd. Lake Wales, FL 33898	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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>Joseph Conroy</u> <u>Joseph Conroy</u> <u>8/17/06</u> <u>863-439-0990</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					