

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000055975		
1. Entity Name JIM RILEY CARPET SERVICE, LLC		
Principal Place of Business 6323 S. ADELIA AVE TAMPA, FL 33616-2601		Mailing Address 6323 S. ADELIA AVE TAMPA, FL 33616-2601
DO NOT WRITE IN THIS SPACE		
		02112006 No Chg-LLC CR2E083 (11/05)
4. FEI Number 20-0567851		Applied For <input 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 RILEY, JAMES J JR 6323 S. ADELIA AVE TAMPA, FL 33616-2601		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)</small> DATE _____		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RILEY, JAMES J JR 6323 S. ADELIA AVE TAMPA, FL 336162601	
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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>James J Riley</u> JAMES J. RILEY		Date <u>2-15-06</u> (813) 831-5952
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>