


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Jan 09, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # L03000056884</b>		
1. Entity Name <b>SMOYER CONSTRUCTION CO., LLC</b>		
Principal Place of Business <b>3503 GULF COAST DR. SPRING HILL, FL 34607</b>		Mailing Address <b>3503 GULF COAST DR. SPRING HILL, FL 34607</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>SMOYER, GEORGE R III 3503 GULF COAST DR. SPRING HILL, FL 34607</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 reinstating)</small> DATE _____		
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>		
9. MANAGING MEMBERS/MANAGERS		<b>DO NOT WRITE IN THIS SPACE</b>
TITLE	<b>MGRM</b>	
NAME	<b>SMOYER, GEORGE R III</b>	
STREET ADDRESS	<b>3503 GULF COAST DR.</b>	
CITY-ST-ZIP	<b>SPRING HILL, FL 34607</b>	
TITLE		
NAME		
STREET ADDRESS		
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CITY-ST-ZIP		
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>George R Smoyer III</u>		<u>1-6-06</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Daytime Phone # <u>352-596-6637</u>



01042006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
**26-5066453**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional  
Fee Required**

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01/11/06-80040-007 50.00