

**LIMITED LIABILITY COMPANY  
ANNUAL REPORT (AR)**

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

03-06-2006 90201 029 \*\*\*\*55.00

DOCUMENT # **103000056989**

1. Entity Name

**Quality Tile & Drywall Services LLC**



**DO NOT WRITE IN THIS SPACE**

**20013308**

2. Principal Place of Business

**7127 Bunker Rd.**

Suite, Apt. #, etc.

3. Mailing Address

**Quality Tile & Drywall**

Suite, Apt. #, etc.

**7127 BUNKER RD.**

CR2E083B (8/05)

City & State

**VERNON, FL.**

City & State

**VERNON, FL.**

4. FEI Number

**26-0077007**

Applied For

Not Applicable

Zip

**32462**

Country

**WALTON**

Zip

**32462**

Country

**WALTON**

5. Certificate of Status Desired ☒

**\$5.00** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**JOHN H. HANEY**

Street Address (P.O. Box Number is Not Acceptable)

**7127 BUNKER RD.**

City

**VERNON**

**FL**

Zip Code

**32462**

**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

Signature, typed or printed name of registered agent and title if applicable

DATE

**FEE IS \$50.00**

**Make Check Payable to Florida Department of State  
DUE BY MAY 1**

9. MANAGING MEMBERS / MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

**JOHN H. HANEY** (Signature)

**March 2, 2006**

**(850) 231-4978**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #