## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Jan 12, 2006 08:00 AM DOCUMENT # L03000057009 Secretary of State 1. Entity Name ALVIN WILLIAMSON, L.L.C. Principal Place of Business Mailing Address 19402 MICHIGAN AVENUE 19402 MICHIGAN AVENUE ODESSA, FL 33556 ODESSA FL 33556 01102006No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 57-1203843 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent WILLIAMSON, ALVIN DO NOT WRITE 19402 MICHIGAN AVENUE ODESSA, FL 33556 IN THIS SPACE 3. 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 Filing Fee is \$50.00 Due by May 1, 2006 9. TITLE MGR WILLIAMSON, ALVIN NAME 19402 MICHIGAN AVENUE STREET ADDRESS CITY-ST-7/P ODESSA, FL 33556 U00000384197 TITLE 01/17/06-90002-005 50.00 NAME STREET ADDRESS 01/20/06--01003--018 \*\*5.00 CITY-\$1-28 TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIE

11. I hereby cartify that the information supplied with this filling 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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