



**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 05, 2006 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L03000057497</b> 1. Entity Name MCATEE MASONRY, LLC	
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Principal Place of Business 4658 CERNY ROAD PENSACOLA, FL 32526	Mailing Address 4658 CERNY ROAD PENSACOLA, FL 32526
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04192006 No Chg-LLC	CR2E083 (11/05)
4. FEI Number 20-0567958	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  SEARS, M. ANN 6160 N. DAVIS HIGHWAY STE. 8 PENSACOLA, FL 32504
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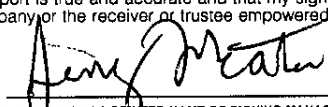
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____	(NOTE: Registered Agent signature required when reinstating)	DATE _____

<b>Filing Fee is \$50.00 Due by May 1, 2006</b>	U000000562705 05/19/06-80066-003 50.00
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MCATEE, JERRY 4658 CERNY ROAD PENSACOLA, FL 32526
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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.		
<b>SIGNATURE:</b> 	4/30/06	8505224038
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		
Date Daytime Phone #		