

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 20, 2006 08:00 AM**  
**Secretary of State**

|                                               |                                                                                    |
|-----------------------------------------------|------------------------------------------------------------------------------------|
| DOCUMENT # L04000006143                       |  |
| 1. Entity Name<br>R J'S PRESSURE CLEANING LLC |                                                                                    |

|                                                                   |                                                          |
|-------------------------------------------------------------------|----------------------------------------------------------|
| Principal Place of Business<br>5811 SW 63RD ST<br>OCALA, FL 34474 | Mailing Address<br>5811 SW 63RD ST<br>OCALA, FL 34474 US |
|-------------------------------------------------------------------|----------------------------------------------------------|

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02252006 No Chg-LLC CR2E083 (11/05)

|                                                           |                                                        |
|-----------------------------------------------------------|--------------------------------------------------------|
| 4. FEI Number<br>20-0636238                               | Applied For<br><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<br><br>WILSON, ROBERT J<br>5811 SW 63RD ST<br>OCALA, FL 34474 |
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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

**Filing Fee is \$50.00**  
**Due by May 1, 2006**

| 9. MANAGING MEMBERS/MANAGERS                   |                                                                |
|------------------------------------------------|----------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>WILSON, ROBERT J<br>5811 SW 63RD ST<br>OCALA, FL 34474 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                |

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04/04/06-20036-024 50.00

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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: *Robert J. Wilson* 3-17-06 352-237-2905