

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Jul 19, 2006 8:00 am
Secretary of State

07-19-2006 90094 002 ****50.00

DOCUMENT # L04000007267 1. Entity Name CHARLTON CONCRETE, LLC					
Principal Place of Business 800 MARGO STREET SUITE 3 TALLAHASSEE FL 32305 US			Mailing Address 800 MARGO STREET SUITE 3 TALLAHASSEE FL 32305 US		
2. Principal Place of Business <i>800-B Margo St.</i>		3. Mailing Address <i>800-B Margo St.</i>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State <i>Tallahassee, Fla</i>		City & State <i>Tallahassee, Fla</i>		4. FEI Number 76-0725606	
Zip <i>32305</i> Country <i>Leon</i>		Zip <i>32305</i> Country <i>Leon</i>		Applied For <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 BROWN, LUTHER 800-B MARGO STREET TALLAHASSEE FL 32305			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 <i>Luther Brown</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				DATE <i>06/28/06</i>	
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BROWN, LUTHER 800-B MARGO STREET TALLAHASSEE FL 32305		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 <i>Luther Brown</i> <i>07/17/06</i> <i>(850) 251-3957</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					