

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 08, 2006 8:00 am
Secretary of State

05-02-2006 90029 030 ****50.00

DOCUMENT # L04000007710

1. Entity Name
DAVID HAWKINS TILE SETTERS LLC



Principal Place of Business

9379 160TH TERRACE
LIVE OAK, FL 32060

Mailing Address

9379 160TH TERRACE
LIVE OAK, FL 32060

DO NOT WRITE IN THIS SPACE



04122006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-0676707

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HAWKINS, DAVID T
9379 160TH TERRACE
LIVE OAK, FL 32060**

**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, handwritten or with electronic signature, of the Registered Agent.

Printed Name of Registered Agent.

DATE

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

9. **MANAGING MEMBERS/MANAGERS**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**MGRM
HAWKINS, DAVID T
9379 160TH TERRACE
LIVE OAK, FL 32060**

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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 606, Florida Statutes.

SIGNATURE:

David T. Hawkins

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

DATE

DATE OF FILING