

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

**FILED
Mar 09, 2006 8:00 am
Secretary of State**

03-09-2006 90003 030 ****50.00

DOCUMENT # L04000009137



1. Entity Name
JOHN F. BAKER MASONRY, L.L.C.

Principal Place of Business
1180 ST. HEBRON RD
QUINCY, FL 32351 US

Mailing Address
1180 ST. HEBRON RD
QUINCY, FL 32351 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

BARNES & JAMES, P.A.
2629 BLAIR STONE RD
TALLAHASSEE, FL 32301

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10.

ADDITIONS/CHANGES

TITLE MGR
NAME BAKER, JOHN F
STREET ADDRESS 1180 ST. HEBRON RD.
CITY-ST-ZIP QUINCY, FL 32351

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

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Delete

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STREET ADDRESS
CITY-ST-ZIP

Change

Addition

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:

John F. Baker

03/07/06 (850) 591-7131

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

Date

Daytime Phone #

20014371



03032006 Chg-LLC CR2E083 (11/05)

4. FEI Number
20-0693830

Applied For
Not Applicable

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