2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2006
Secretary of State

DOCUMENT# L04000013095

Entity Name: SPEARS & SON CONSTRUCTION, L.L.C.

Current Principal Place of Business:

7211 BEULAH ROAD
PENSACOLA, FL

New Principal Place of Business:

Current Mailing Address:

33160 LOST RIVER ROAD
SEMINOLE, AL 36574

New Mailing Address:

FEI Number: 20-0798743 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WHIBBS, SUZANNE N
105 EAST GREGORY SQUARE
PENSACOLA, FL 32502 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	SPEARS, LARRY C	
Address:	33160 LOST RIVER ROAD	
City-St-Zip:	SEMINOLE, AL 36574	
Title:	MGRM	( ) Delete
Name:	SPEARS, JANET	
Address:	33160 LOST RIVER ROAD	
City-St-Zip:	SEMINOLE, AL 36574	
Title:	MGRM	( ) Delete
Name:	SPEARS, LARRY CHARLES	
Address:	19362 THREE RIVERS ROAD LT 7	
City-St-Zip:	SEMINOLE, AL 36574	

ADDITIONS/CHANGES:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	MGRM	(X) Change ( ) Addition
Name:	SPEARS, LARRY CHARLES	
Address:	33160 LOST RIVER ROAD	
City-St-Zip:	SEMINOLE, AL 36574	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JANET SPEARS MGRM 04/13/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date