

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000017025

**FILED**  
**Jan 11, 2006**  
**Secretary of State**

**Entity Name:** FLINT'S TRACTOR SERVICE, L.L.C.

**Current Principal Place of Business:**

11610 RUTH RD.  
N. FT. MYERS, FL 33917

**New Principal Place of Business:**

**Current Mailing Address:**

11610 RUTH RD.  
N. FT. MYERS, FL 33917

**New Mailing Address:**

**FEI Number:** 26-0082341      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FLINT, JAMES R MGRM  
11610 RUTH RD.  
N. FT. MYERS, FL 33917      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: FLINT, JAMES R  
Address: 11610 RUTH RD.  
City-St-Zip: N. FT. MYERS, FL 33917

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAMES R FLINT

MGRM

01/11/2006

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