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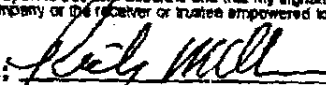
Mary Rawls

407-689-3694

P. 12

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 19, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000022760		
1. Entity Name LINER PATCH, LLC		
Principal Place of Business 6431 MT PLYMOUTH RD APOPKA, FL 32712	Mailing Address 6431 MT PLYMOUTH RD APOPKA, FL 32712	
DO NOT WRITE IN THIS SPACE		
2. Name and Address of Current Registered Agent INCORPORATE USA, INC. 3160 SANDY RIDGE DR CLEARWATER, FL 33761		
3. 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 withdrawing)		
Filing Fee is \$50.00 Due by May 1, 2006		
B. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRN DUNN, RICKY M 6431 MT. PLYMOUTH RD APOPKA, FL 32712	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
17. 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:  4-17-06 407-4938867		
SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		



D4062006Na Chg-LLC

CR2ED83 (11/06)

4. FRI Number
20-0812006

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$5.00 Additional
Fee Required**

**DO NOT WRITE
IN THIS SPACE**

U00000518657
05/02/06-80022-004 55.00

**DO NOT WRITE
IN THIS SPACE**