

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 NOV 16 AM 9:41

9-15-06  
150.00

DOCUMENT # L04000033413

1. Entity Name  
BURNIE GENERAL WELDER & REPAIR, LLC



Principal Place of Business  
1726 40TH ST. SOUTH  
ST. PETERSBURG, FL 33711

Mailing Address  
1726 40TH ST. SOUTH  
ST. PETERSBURG, FL 33711

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07242006 Chg-LLC CR2E083 (11/05)

4. FEI Number  
59-3744015

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BURNEY, HOLLIS JR  
1726 40TH ST. SOUTH  
ST. PETERSBURG, FL 33711

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

HOLLIS BURNEY

Hollis Burney

11-14-06

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 September 6, 2006

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR  
NAME BURNIE, HOLLIS JR  
STREET ADDRESS 1726 40TH ST. SOUTH  
CITY - ST - ZIP ST. PETERSBURG, FL 33711 ☐ Delete

TITLE  
NAME 700081861437 ☐ Change ☐ Addition  
STREET ADDRESS 11/16/06--01041--004 \*\*100.00  
CITY - ST - ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME 700081861437 ☐ Change ☐ Addition  
STREET ADDRESS 11/16/06--01041--005 \*\*55.00  
CITY - ST - ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
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CITY - ST - ZIP

TITLE  
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TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY - ST - ZIP

REINSTATEMENT 2006

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:

Hollis Burney

727-459-8292

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

Date

Daytime Phone #