

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000037459

1. Entity Name
DOBRUCK CONSTRUCTION LLC



Principal Place of Business
**41940 OUTLAW LANE
WEIRSDALE, FL 32195**

Mailing Address
**PO BOX 1151
LADY LAKE, FL 32158**

DO NOT WRITE IN THIS SPACE



02062006 No Chg-LLC

CRZE083 (11/05)

4. FEI Number
76-0757635

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DOBRUCK, WALTER J II
41940 OUTLAW LANE
WEIRSDALE, FL 32195**

**DO NOT WRITE
IN THIS SPACE**

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**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
DOBRUCK, WALTER J II
PO BOX 1151
LADY LAKE, FL 32158**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
DOBRUCK, FAITH E
PO BOX 1151
LADY LAKE, FL 32158**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000434317
02/24/06-80059-013 55.00

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IN THIS SPACE**

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: X *Walter J. Dobruck II*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/12/06
Date

Daytime Phone #