
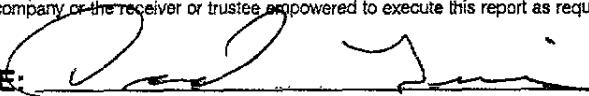


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Apr 14, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # L04000041697</b> 1. Entity Name D. TESSIER CARPENTRY LLC		
Principal Place of Business 42308 E SAFFRON CT. EUSTIS, FL 32736-9594		Mailing Address 42308 E SAFFRON CT. EUSTIS, FL 32736-9594
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  TESSIER, DAVID 42308 E SAFFRON CT. EUSTIS, FL 32736-9594		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating)</small>		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TESSIER, DAVID 42308 E SAFFRON CT. EUSTIS, FL 32736-9594	
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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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date <u>4/12/06</u> Daytime Phone # <u>352-551-9145</u>



03162006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 04-3793135	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

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04/28/06-80031-023 55.00

**DO NOT WRITE  
IN THIS SPACE**