2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052700

Entity Name: C & C EXTERIORS, LLC

Address:

City-St-Zip:

ST. CLOUD, FL 34773 US

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9205 CONCORD RD. ST. CLOUD, FL 34773 US **Current Mailing Address: New Mailing Address:** 9205 CONCORD RD. ST. CLOUD, FL 34773 US FEI Number: 20-1370447 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COLLINS, DUANE 9205 CONCORD RD. ST. CLOUD, FL 34773 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete COLLINS, DUANE Name: Name: Address: 9205 CONCORD RD. Address: City-St-Zip: ST. CLOUD, FL 34773 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: COON, ROBERT Name: Address: 9205 CONCORD RD. Address: City-St-Zip: ST. CLOUD, FL 34773 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition LAY, JACOB W Name: Name: 9205 CONCORD RD.

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.

Address:

City-St-Zip:

SIGNATURE: DUANE COLLINS **MGRM** 04/28/2006