


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

**FILED
Mar 30, 2006 08:00 AM
Secretary of State**

DOCUMENT # L04000054302

1. Entity Name
LUIS D GARCIA, LLC



Principal Place of Business P.O. BOX 2554 LAKELAND, FL 33806 US	Mailing Address P.O. BOX 2554 LAKELAND, FL 33806 US
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DO NOT WRITE IN THIS SPACE



03242006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1408888	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GARCIA, LUIS D
911 ASHTON OAKS CIR
LAKELAND, FL 33813

**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 _____ (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	MGRM GARCIA, LUIS D 911 ASHTON OAKS CIR LAKELAND, FL 33813
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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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **LUIS D GARCIA** 3/27/06 803-660-25

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

Date Daytime Phone #