


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 09, 2006 8:00 am
Secretary of State

05-09-2006 90021 001 ***110.00

| | |
|--|---|
| DOCUMENT # L04000062585 1. Entity Name JUDY & CLEO HALL, LLC |  |
|--|---|

| | |
|---|---|
| Principal Place of Business 1910 HWY. 37, SOUTH MULBERRY, FL 33860 US | Mailing Address P. O. BOX 857 MULBERRY, FL 33860 US |
|---|---|

DO NOT WRITE IN THIS SPACE

30007583



04282006 No Chg-LLC

CR2E083 (11/05)

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|--|--|
| 4. FEI Number 20-1534587 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

**HALL, CLEO
1910 HIGHWAY 37, SOUTH
MULBERRY, FL 33860**

**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 HALL, CLEO P. O. BOX 857 MULBERRY, FL 33860 |
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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: *Cleo Hall* 4/27/06 863-559-5679

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

Date

Daytime Phone #