## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

## Jun 05, 2006 08:00 AM DOCUMENT # L04000066784 **Secretary of State** 1. Entity Name YOUBERG VYNL FENCING, L.L.C. Principal Flace of Business Mailing Address 118 N. HARRIS AVE. PANAMA CITY FL 32401 118 N. HARRIS AVE PANAMA CITY FL 32401 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) City & State City & State Applied For 4. FEI Number 20-1606683 Not Applicable Zip Country Country Zip \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BARNES & JAMES, P.A. Street Address (P.O. Box Number is Not Acceptable) 2629 BLAIR STONE ROAD TALLAHASSEE FL 32301 City Zip Code 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. (NOTE: Registered Agent signature required when reinstatrik)) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES JULE MGR TITLE ☐ Change ☐ Addition Delete YOUBERG, MARK D NAME NAME U00000566655 STREET ADDRESS STREET ADDRESS 118 N. HARRIS AVE. 06/05/06-80001-010 50.00 CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32401 Delete TITE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CATY-ST-ZIP CITY-ST-ZIP THE TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition Delete NAME STREET ADDRESS STREET ADDRESS CITY ST-7IP CITY-ST-ZIP TITLE ☐ Delete THE Change ☐ Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP

**FILED** 

SIGNATURE: // Och Joy MARK D. YOURSELF 5/26/06 850/315/08/

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes, 1 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 hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.