

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT-**

FILED
Apr 19, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000067373 1. Entity Name NEW STRUCTURES, LLC	
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Principal Place of Business 11497 COLUMBIA PARK DR WEST STE 1 JACKSONVILLE, FL 32258	Mailing Address 11497 COLUMBIA PARK DR WEST STE 1 JACKSONVILLE, FL 32258
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DO NOT WRITE IN THIS SPACE

03162006 No Chg-LLC CR2E083 (11/05)

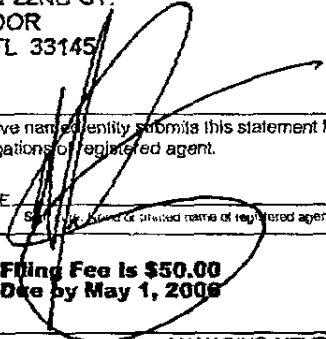
4. FEI Number 20-1628722	☐ Applied For ☐ Not Applied
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145**

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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 **3-16-06**

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BAGDONAS, MICHAEL A 11497 COLUMBIA PARK DR WEST STE 1 JACKSONVILLE, FL 32258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STANLEY, NEWMAN 11497 COLUMBIA PARK DR WEST STE 1 JACKSONVILLE, FL 32258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JOHNS, JAMES C 11497 COLUMBIA PARK DR WEST STE 1 JACKSONVILLE, FL 32258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SOLANO, MOISES A 11497 COLUMBIA PARK DR WEST STE 1 JACKSONVILLE, FL 32258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000519015
05/02/06-80036-003 50.00

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IN THIS SPACE**

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 