

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071871

FILED
Jan 05, 2006
Secretary of State

Entity Name: THOMAS T. WHITE, GENERAL CONTRACTOR, LLC

Current Principal Place of Business:

371374 KINGS FERRY RD
HILLIARD, FL 32046

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1584
HILLIARD, FL 32046

New Mailing Address:

FEI Number: 20-1703370

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WHITE, THOMAS T
241881 CR 121
HILLIARD, FL 32046 US

Name and Address of New Registered Agent:

WHITE, THOMAS T
371374 KINGSFERRY ROAD
HILLIARD, FL 32046 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:

01/05/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WHITE, THOMAS T
Address: 241881 CR 121
City-St-Zip: HILLIARD, FL 32046

Title: MGRM () Delete
Name: JOHNSON, ROLLEN Y
Address: 306 PEACH STREET
City-St-Zip: FOLKSTON, GA 31537

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WHITE, THOMAS T
Address: 371374 KINGSFERRY ROAD
City-St-Zip: HILLIARD, FL 32046

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: GINETTO, DAVID L
Address: 26098 HEARTH PLACE
City-St-Zip: HILLIARD, FL 32046

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.

SIGNATURE: THOMAS T. WHITE

MGRM

01/05/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date