

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000072259

FILED
May 19, 2006
Secretary of State

Entity Name: BOBS DO ALL LLC

Current Principal Place of Business:

12420 OLD GRISTMILL RD.
EBRO, FL 32437

New Principal Place of Business:

12420 OLD GRISTMILL RD.
EBRO, FL 32437 US

Current Mailing Address:

12420 OLD GRISTMILL RD.
EBRO, FL 32437

New Mailing Address:

12420 OLD GRISTMILL RD.
EBRO, FL 32437 US

FEI Number: 36-4562114 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ADDIS, BOBBY L
12420 OLD GRISTMILL RD.
EBRO, FL 32437 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ADDIS, BOBBY L
Address: 12420 OLD GRISTMILL RD.
City-St-Zip: EBRO, FL 32437

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ADDIS, BOBBY L
Address: 12420 OLD GRISTMILL RD.
City-St-Zip: EBRO, FL 32437 US

Title: MGRM () Change (X) Addition
Name: CALHOUN, TODD J
Address: 120 PARKER VILLAGE CIRCLE
City-St-Zip: PANAMA CITY, FL 32404 US

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: BOBBY L ADDIS

MGRM

05/19/2006

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