

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073985

FILED  
Sep 04, 2006  
Secretary of State

Entity Name: MCCORMICK TILE & STONE, LLC

**Current Principal Place of Business:**

63 W. OLEANDER RD.  
DEFUNIAK SPGS, FL 32433 US

**New Principal Place of Business:**

911 COUNTY HWY. 181A  
PONCE DE LEON, FL 32455

**Current Mailing Address:**

63 W. OLEANDER RD.  
DEFUNIAK SPGS, FL 32433 US

**New Mailing Address:**

911 COUNTY HWY. 181A  
PONCE DE LEON, FL 32455

FEI Number: 26-0097340      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:**

MCCORMICK, CHARLES J  
63 W. OLEANDER RD.  
DEFUNIAK SPGS, FL 32433 US

**Name and Address of New Registered Agent:**

911 COUNTY HWY. 181A  
PONCE DE LEON, FL 32455

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: MCCORMICK, CHARLES J  
Address: 63 W. OLEANDER RD.  
City-St-Zip: DEFUNIAK SPG, FL 32433 US

Title: MGR (X) Delete  
Name: RICHARDSON, JAMES I  
Address: 41 B NORTH 19TH ST  
City-St-Zip: DEFUNIAK SPGS, FL 32433 US

Title: MGR ( ) Delete  
Name: BRUCE, JACOB A  
Address: 304 MARION DR  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433 US

**ADDITIONS/CHANGES:**

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

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

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

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: CHARLES J MCCORMICK

MGR

09/04/2006

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