## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT # L04000074587 NATIVE TILE AND MARBLE "LLC" Principal Place of Business Mailing Address 3616 CLEMWOOD DR. 3616 CLEMWOOD DR. ORLANDO, FL 32803 ORLANDO, FL 32803 US DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent

**FILED** Apr 24, 2006 08:00 Al Secretary of State

CR2E083 (11/05)



## 01072006 No Chg-LLC

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

SMALLEY, JAMES E JR 3616 CLEMWOOD DR ORLANDO, FL 32803

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

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_	Signature, typed or printed name of registered agent and little it applicable.	(NOTE Registered Agent signature required when reinstailing)	DATE
Filing Fee is \$50.00 Due by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SMALLEY, JAMES JR 3616 CLEMWOOD DR ORLANDO, FL 32803		U00000527076 05/04/06-80037-019 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			· - ·
TITLE NAME STREET ADDRESS CITY-SY-ZIP			NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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 of the receiver pr trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE