2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000075386

FILED
Jul 12, 2006
Secretary of State

Entity Name: D.R.T. CONTRACTING COMPANY, LLC

Current Principal Place of Business:

549 EAST SILVERTHORN LANE
ST. AUGUSTINE, FL 32095

New Principal Place of Business:

549 EAST SILVERTHORN LANE
PONTE VEDRA, FL 32081

Current Mailing Address:

549 EAST SILVERTHORN LANE
ST. AUGUSTINE, FL 32095

New Mailing Address:

549 EAST SILVERTHORN LANE
PONTE VEDRA, FL 32081

FEI Number: 20-1762657   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:

TATZEL, DEAN R
549 EAST SILVERTHORN LANE
ST AUGUSTINE, FL 32095   US

Name and Address of New Registered Agent:

TATZEL, DEAN R
549 EAST SILVERTHORN LANE
PONTE VEDRA, FL 32081   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: DEAN R. TATZEL   07/12/2006
_____
             Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM ( ) Delete
Name:	TATZEL, DEAN R
Address:	549 EAST SILVERTHORN LANE
City-St-Zip:	ST. AUGUSTINE, FL 32095

ADDITIONS/CHANGES:

Title:	MGRM (X) Change ( ) Addition
Name:	TATZEL, DEAN R
Address:	549 EAST SILVERTHORN LANE
City-St-Zip:	PONTE VEDRA, FL 32081

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: DEAN R. TATZEL   MGRM   07/12/2006
_____
             Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date