

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Jan 26, 2006 8:00 am
Secretary of State

01-26-2006 90067 005 ****50.00

DOCUMENT # L04000079135

1. Entity Name

RON PUTMAN /JOE HOLLIDAY CONSTRUCTION, L.L.C.



Principal Place of Business

1233 HUNTINGTON RIDGE ROAD
LYNN HAVEN FL 32444
US

Mailing Address

1233 HUNTINGTON RIDGE ROAD
LYNN HAVEN FL 32444
US



2. Principal Place of Business

3. Mailing Address

4403 Bayou Oaks Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E083 (10/05)

City & State

City & State

Panama City FL

4. FEI Number

20-1832169

Applied For

Not Applicable

Zip

Country

Zip

32404

Country

Bay

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HESS, BRIAN D
9108 FRONT BEACH ROAD
PANAMA CITY BEACH FL 32407

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☐ Delete
NAME RON PUTMAN CONSTRUCTION, INC.
STREET ADDRESS 1233 HUNTINGTON RIDGE ROAD
CITY-ST-ZIP LYNN HAVEN FL 32444

TITLE MGR ☐ Delete
NAME JOE HOLLIDAY CONSTRUCTION, INC.
STREET ADDRESS 1202 HUNTINGTON RIDGE ROAD
CITY-ST-ZIP LYNN HAVEN FL 32444

TITLE MGR ☐ Delete
NAME PUTMAN, ANITA W
STREET ADDRESS 1233 HUNTINGTON RIDGE ROAD
CITY-ST-ZIP LYNN HAVEN FL 32444

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS / CHANGES

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 4403 Bayou Oaks Dr.
CITY-ST-ZIP Panama City FL 32404

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 4403 Bayou Oaks Dr.
CITY-ST-ZIP Panama City FL 32404

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 4403 Bayou Oaks Dr.
CITY-ST-ZIP Panama City FL 32404

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 Section 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Anita W Putman

Date

1-20-06

Daytime Phone #

5227166

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