


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000080266

1. Entity Name
F & A LLC



Principal Place of Business 5220 BRITTANY DRIVE S. BUILDING 5, UNIT 304 ST. PETERSBURG, FL 33715	Mailing Address 5220 BRITTANY DRIVE S. BUILDING 5, UNIT 304 ST. PETERSBURG, FL 33715
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03152006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1853623	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**VAN WINKLE, MARY E
 2815 PROCTOR ROAD
 SARASOTA, FL 34231**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FRAZIER, ROBERT C SR. 5220 BRITTANY DRIVE S., BLDG. 5, UNIT 304 ST. PETERSBURG, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FRAZIER, CONNIE 3288 EDINGTON ROAD FAIRLAWN, OH 44333
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NEWBAUER, JEROME 1459 KARL ROAD COPLEY, OH 44321
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 04/27/06 80051-007 50.00

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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Robert C. Frazier **ROBERT C. FRAZIER** 03/22/06 330-666-0337

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #