

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081222

FILED
May 11, 2006
Secretary of State

Entity Name: HOOSIER RESTORATION SERVICES L.L.C.

Current Principal Place of Business:

658 24TH ST. N.W.
A
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

658 24TH ST. N.W.
A
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 86-1120465 **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:

JACKSON, GREGORY WAYNE
658 24TH. ST. N.W.
A
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

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: MGRM () Delete
Name: ROSS, MELINDA G
Address: 401 LAKE MARTHA DR. N.E.
City-St-Zip: WINTER HAVEN, FL 33881

Title: MGRM () Delete
Name: OBERHOULSER, ANDREW L
Address: 1202 W LK. OTIS DR.
City-St-Zip: WINTER HAVEN, FL 33881

Title: MGRM () Delete
Name: RYAN, CHARLES W
Address: 553 GENTRY ST.
City-St-Zip: FRANKFORT, IN 46041

Title: MGRM () Delete
Name: JACKSON, GREGORY W
Address: 658 24TH ST. NW
City-St-Zip: WINTER HAVEN, FL 33880

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:

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: GREGORY W. JACKSON

MGRM

05/11/2006

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