## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000087893

Entity Name: MILAR CUSTOM HOMES, LLC

FILED Apr 21, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

172 CATTAIL CIRCLE 11555 CENTRAL PARKWAY JACKSONVILLE, FL 32259

SUITE 304

JACKSONVILLE, FL 32224

**Current Mailing Address: New Mailing Address:** 

11555 CENTRAL PARKWAY 172 CATTAIL CIRCLE JACKSONVILLE, FL 32259

SUITE 304

JACKSONVILLE, FL 32224

FEI Number: 20-1973141 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

FULTON, LARRY G BOURRE, MICHAEL P. 172 CATTAIL CIRCLE 11555 CENTRAL PARKWAY JACKSONVILLE, FL 32259 US SUITE 304

JACKSONVILLE, FL 32259 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: MICHAEL P BOURRE 04/21/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change ( ) Addition

FULTON, LARRY G Name: FULTON, LARRY G Name: 172 CATTAIL CIRCLE Address: 11555 CENTRAL PARKWAY SUITE 304 Address:

City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition

BOURRE', MICHAEL Name: BOURRE', MICHAEL P Name: Address: 8418 BERESFORD LANE Address: 11555 CENTRAL PARKWAY SUITE 304

City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition

GOODWYN, BARBARA D Name: GOODWYN, BARBARA D Name:

1640 POWERS FERRY ROAD, BLDG 22 STE 300 1640 POWERS FERRY RD, BLDG 22 STE 300 Address: Address:

City-St-Zip: MARIETTA, GA 30067 City-St-Zip: MARIETTA, GA 30067

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: MICHAEL P BOURRE **MGRM** 04/21/2006