


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000091619 1. Entity Name LLOYD J EVANS LLC	
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Principal Place of Business 1067 FAIRFAX CIRCLE WEST BOYNTON BEACH, FL 33436 US	Mailing Address 1067 FAIRFAX CIRCLE WEST BOYNTON BEACH, FL 33436 US
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07202006No Chg-LLC

CR2E083 (11/05)

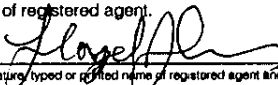
DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2039695	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent OLEA, JOHN 11382 PROSPERITY FARMS RD. SUITE 229 PALM BEACH GARDENS, FL 33410
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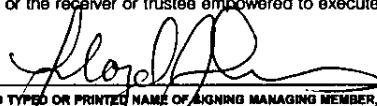
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE  <small>Signature typed or printed name of registered agent and title if applicable</small>	DATE <u>7/20/06</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>

**Filing Fee is \$50.00
Due by September 6, 2006**

U000000572187
07/25/06-80019-018 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EVANS, LLOYD J 1067 FAIRFAX CIRCLE WEST BOYNTON BEACH, FL 33436
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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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	DATE <u>7/20/06</u> <small>Date</small>	DAYTIME PHONE # <u>561-767-0704</u> <small>Daytime Phone #</small>