

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093318

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: WAYNE & JOY TRUCKING, LLC

**Current Principal Place of Business:**

15827 SWITCH CANE STREET  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

475 MONTGOMERY PLACE  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

1106 PARK AVENUE  
ORANGE PARK, FL 32073

FEI Number: 76-0774849

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KELLEY, GOLDBERG, LEACH & COHN PL  
475 MONTGOMERY PLACE  
ALTAMONTE SPRINGS, FL 32714 US

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

WILEY, RANDALL J E.A.  
1106 PARK AVENUE  
ORANGE PARK, FL 32073 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: RANDALL J. WILEY, E.A.

04/26/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WILLIAMS, WAYNE D  
Address: 15827 SWITCH CANE STREET  
City-St-Zip: CLERMONT, FL 34711

Title: MGR ( ) Delete  
Name: WILLIAMS, JOVIE C  
Address: 15827 SWITCH CANE STREET  
City-St-Zip: CLERMONT, FL 34711

**ADDITIONS/CHANGES:**

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: WAYNE WILLIAMS

MGRM

04/26/2006

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