2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 03, 2007
Secretary of State

DOCUMENT# L04000093519

Entity Name: CT & SONS, LLC

Current Principal Place of Business:

US HWY NO. 1 ROCKLAND KEY
KEY WEST, FL 33040 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 787
KEY WEST, FL 33041 US

New Mailing Address:

FEI Number: 20-2067060 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NICI, JAMES R ESQ
C/O COX & NICI 1185 IMMOKALEE ROAD
SUITE 110
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

FOWLER WHITE BOGGS BANKER PA
5811 PELICAN BAY BLVD.
SUITE 600
NAPLES, FL 34108 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: AARON A. FARMER, ESQ. 04/03/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRP ( ) Delete
Name: TOPPINO, FRANK P
Address: PO BOX 787
City-St-Zip: KEY WEST, FL 33041 US

Title: MGRV ( ) Delete
Name: TOPPINO, EDWARD SR.
Address: PO BOX 787
City-St-Zip: KEY WEST, FL 33041 US

Title: T ( ) Delete
Name: TOPPINO, FRANK P
Address: PO BOX 787
City-St-Zip: KEY WEST, FL 33041 US

Title: S ( ) Delete
Name: TOPPINO, EDWARD SR.
Address: PO BOX 787
City-St-Zip: KEY WEST, FL 33041 US

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: FRANK P. TOPPINO MGRP 04/03/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date