

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90131 010 ***150.00

DOCUMENT # L04000093809					
1. Entity Name SOLID ROCK CONSTRUCTION, LLC					
Principal Place of Business 8156 NAVARRE PARKWAY NAVARRE, FL 32566 US			Mailing Address 8156 NAVARRE PARKWAY NAVARRE, FL 32566 US		
2. Principal Place of Business		3. Mailing Address 2313 Highway 87			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Navarre, Fl		4. FEI Number 20-2160364	
Zip		Country		Zip 32566	
Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent LYNCHARD LAW FIRM, PA 7552 NAVARRE PARKWAY SUITE 9 NAVARRE, FL 32566			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SPEAR, CARL H 8156 NAVARRE PARKWAY NAVARRE, FL 32566	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HARTLEY, BOB 8156 NAVARRE PARKWAY NAVARRE, FL 32566	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Hartley, Bob 6794 Tom King Bayou Rd Navarre, Fl 32566	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Hartley, Bob 6794 Tom King Bayou Rd Navarre, Fl 32566	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Hartley, Bob 6794 Tom King Bayou Rd Navarre, Fl 32566	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Hartley, Bob 6794 Tom King Bayou Rd Navarre, Fl 32566	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Hartley, Bob 6794 Tom King Bayou Rd Navarre, Fl 32566	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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: _____		2/1/06 8509393837			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #			