2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 27, 2006 8:00 am Secretary of State

1. Entity Name REDCON'S TRUCKING, LLC						03-02-	2006 90136	5 031 ***	**50.00
1662 SW RU	e of Business ITLAND STREET ICIE, FL 34987	Mailing Address 1662 SW RUTLAND STRE PORT ST. LUCIE, FL 349	SW RUTLAND STREET						
2. Principal Place of Business 7950 30 th AVE Suite, Apt. #, etc.		3. Mailing Address 7950 130TH Avc Suite, Apt. #, etc.							
				02102006	Chg-LLC	CR2E	083 (11/05)	•	
City & State FELLS MERE FL		City & State FELLS MENE FL			4. FEI Numb	15-22U	5775ء	├	oplied For of Applicable
Zip Country 32948		Zip Country 32948			5. Certificate	of Status Des	-	\$5.00 Ad	ditional
3444	6. Name and Address of Current R		·		l		New Registered	Fee Require Agent	ed .
CONNOLLY, SHELLIE S			Name	Name					
1662 SW I	RUTLAND STREET LUCIE, FL 34987			Street Address (P.O. Box Number is Not Acceptable)					
			City					Zip Coc	<u></u>
 The above named entity submits this statement for the purpose of changing its registered office or registered agent. 					MERE ed agent, or bo	oth, in the State	of Florida. Lem	- > >	948
SIGNATURE									
Signiture, hosd or printed name of registered agent and site if applicable. PHOTE: Registered Agent agnature required when it						·	DATE	•,	
FI D	iling Fee is \$50.00 ue by May 1, 2006	<u>_</u> "			FI	Make check p orida Departm			
9. TIRE	MANAGING MEMBER		10.			ADDITI	ONS/CHANGES		
HAME	CONNOLLY, SHELLIE S	☐ Octobe	TITLE NAME					Change	Addition
STREET ADDRESS CITY-ST-ZIP	1662 SW RUTLAND STREET PORT ST. LUCIE, FL 34987		STREET ADDRES	1	50 130 LSMERE	OTH AVE			
TITLE	MGR	☐ Delete	TITLE	FEL	LSMERE	FL	32948	Change	Addition
NAME STREET ADDRESS	CONNOLLY, MICHAEL 1662 SW RUTLAND STREET		NAME STREET ADDRESS	795		TH AUE			
CITY-SI-ZIP	PORT ST. LUCIE, FL 34987		CITY-ST-ZIP	1	LSMERE	FL	32948		İ
TITLE NAME		☐ Geiete	TITLE					☐ Change	Audition
STREET ADDRESS CITY+ST-ZIP			STREET ADDRESS CHY-ST-ZIP						
TITLE NAME		☐ Delete	TITLE .					Change	Addition
STREET ACCRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
TITLE NAME		☐ Delete	TOTLE				-	Change	Addition
STREET ADDRESS CNTY-S1-ZIP			NAME STREET ADDRESS CITY-ST-ZIP			•	••		-
TITLE NAME	•	☐ Defets	BILE					Change	Addition
STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		NAME STREET ADDRESS CITY-ST-ZIP					•	
11. I hereby certify that the information supplied with this filting 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: Stude 5. COMPLLY 2-8030 SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING MANAGING MEMBER, MEMB									



March 6, 2006

REDCON'S TRUCKING, LLC 7950 130TH AVE FELLSMERE, FL 32948

Subject: REDCON'S TRUCKING, LLC

Reference Number:

C05000010799

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/RM ANNUAL REPORTS SECTION