2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 24, 2006 8:00 am Secretary of State

(904) 355-1781

Daytime Phone #

2/21/06

DOCUI 1. Entity Nam FRK NEV	e	#L050000318	515				02-24-2006	90244 04	8 ******3!	J.00	
Principal Place 155 E. 21ST JACKSONVILL	STREET		Mailing Address 155 E. 21ST STREET JACKSONVILLE, FL 32206-2104			1 0 0 0 0 0	• • • • • • • • • • • • • • • • • • •		1027	7	
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02092006	Chg-LLC	CR2E083	(11/05)		
City & State			City & State			4. FEI Numbe 59-05	73002		 	ptied For Applicable	
Zip	(ip Country		Zip Country		try	5. Certificate	of Status Desired		5.00 Addi e Required		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
RAX CO. 50 NORTH LAURA STREET, SUITE 3300					Dennis D. Frick, Esquire Street Address (P.O. Box Number is Not Acceptable)						
JACKSON						155 East 21st Street					
				City J.	acksonvi	11e	FL	^z 3220	6		
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)								21, 200 DATE	۵۵		
Fi • De	ling Fee ue by Ma	is \$50.00 y 1, 2006				,		e check pay Departmen			
9		MANAGING MEMBER	RS/MANAGERS	10.			ADDITIONS/	CHANGES			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	155 Ea Jacks	da Rock Indust ast 21st Stree onville, FL 32	t 206					[Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Presid Incomp 155 Ed Jackso	dent son S. Baker I ast 21st Stree onville, FL 32	T E 206						Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Gary S 155 Ea Jackso	President Sauer ast 21st Stree onville, FL 32	206		i i			(☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		urer D. Milton, Jr. ast 21st Stree onville, FL 32			I			(Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secret Dennis 155 Ea Jackso	tary s D. Frick ast 21st Stree onville, FL 32	□ Defete t 206					[Change	Addition .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Asst. Wallad 155 Ed Jacksd	Secretary ce A. Patzke ast 21st Stree onville, FL 32	□ Delete t 206					[_ Change	☐ 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 cath, that I am a managing member or manager of the											

Dennis D. Frick, Secretary