

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

05-02-2006 90032 044 ****50.00

DOCUMENT # L05000042723			
1. Entity Name EXTREME DRYWALL LLC			
Principal Place of Business 4014 ORANGEFIELD PL VALRICO, FL 33594 US		Mailing Address 4014 ORANGEFIELD PL VALRICO, FL 33594 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. Filing Number 20-0024594		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent KERCE, RAY A MR. 4014 ORANGEFIELD PL VALRICO, FL 33594		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Member 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 _____ 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-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
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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 806, Florida Statutes.			
SIGNATURE: <u>Ray A Kerce</u>		Date: <u>4/27/06</u>	