2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000047805

Current Principal Place of Business:

City-St-Zip:

Title:

Title:

Name:

Address: City-St-Zip:

Name:

Address:

APOPKA, FL 32712

STEELE, ROBERT A SR.

6087 ALBANENE AVE.

() Delete

() Delete

MGRM

City-St-Zip: COCOA, FL 32927

Entity Name: ADVANCE RUBBER PRODUCTS, LLC

FILED Jul 15, 2006 Secretary of State

New Principal Place of Business:

522 HUNT APOPKA, I	CLUB BLVD., #101 FL 32703		
Current Mailing Address:		New Maili	ng Address:
522 HUNT APOPKA, I	CLUB BLVD., #101 FL 32703		
FEI Number: 20-3018552 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
2505 CAN	ND, WALLACE L TER CLUB TRAIL FL FL32712 US		
The above in the State	named entity submits this statement for the purpose e of Florida.	of changing i	ts registered office or registered agent, or both
SIGNATUR	RE:		
	Electronic Signature of Registered Agent		Date
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete MCFARLAND, LEAH N 2505 CANTER CLUB TRAIL APOPKA, FL 32712	Title: Name: Address: City-St-Zip:	MGRM (X) Change () Addition MCFARLAND, LEAH N CEO 506 HEATHER BRITE CIR APOPKA, FL 32712
Title: Name: Address: City-St-Zip:	MGRM () Delete STEELE, GAIL P.O. BOX 571 SHARPES, FL 32959	Title: Name: Address: City-St-Zip:	MGRM (X) Change () Addition STEELE, GAIL VP P.O. BOX 571 SHARPES, FL 32959
Title: Name: Address:	MGRM () Delete MCFARLAND, WALLACE L JR 2505 CANTER CLUB TRAIL	Title: Name: Address:	MGRM (X) Change () Addition MCFARLAND, WALLACE L CFO 506 HEATHER BRITE CIR

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.

City-St-Zip:

Title:

Title:

Name: Address:

Name:

Address:

City-St-Zip:

City-St-Zip:

APOPKA, FL 32712

STEELE, ROBERT A CTO

6087 ALBANENE AVE.

COCOA, FL 32927 US

DARA, EPSTEIN COO

APOPKA, FL 32712 US

506 HEATHER BRITE CIR

(X) Change () Addition

() Change (X) Addition

MGRM

MGRM

SIGNATURE: WALLACE MCFARLAND CFO 07/15/2006