## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT					SECRETARY I	D OF STATE
DOCUMENT # L05000071589  1. Entity Name CARL SCHEL PAINTING, LLC					06.SEB, 14-4	D OF STATE RPORATIONS P & J. COM/WC 145 & Form 5 146-4
Principal Plac 8585 150TH LIVE OAK, FL	I ST	Mailing Address 8585 150TH ST LIVE OAK, FL 32060	US	0.1	<b>F</b> or	m# D# Wc 256
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			12006 Chg-LLC	CR2E083 (11/05)
City & State		City & State		4. FE	Wumber 4805790	
Zip	Country	Zip	Country		ertificate of Status Desired	Fee Required
	6. Name and Address of Curre	nt Registered Agent	Name	7. Na	ame and Address of New	Registered Agent
JONES, LAURIE A 3304 SW 72ND AVE PALM CITY, FL US				ddress (P.O. Bo	(P.O. Box Number is Not Acceptable)	
			City			FL Zip Code
the obligat	named entity submits this statement ions of registered agent.	for the purpose of changing its	registered office or	registered age	nt, or both, in the State of	Florida. I am familiar with, and accept  Sept. 17, 2006
SIGNATURE .	Signature, typed or printed name of registered age		: Registered Agent signate	re required when rem	stating)	DATE
Filing Fee Is \$50.00 Due by September 15, 2006						ake check payable to da Department of State
9.		BERS/MANAGERS	10.		ADDITION	S/CHANGES
TITLE	MGRM	□ <b>-</b>	TITLE			☐ Change ☐ Addition
NAME	SCHEL, CARL	☐ Delete	NAME			• • - • •
NAME STREET ADDRESS CITY-ST-ZIP	SCHEL, CARL 8585 150TH ST LIVE OAK, FL 32060	□ Derete			<b>800080</b> 09/22/06010	995358 <b>o</b>
STREET ADDRESS CITY-ST-ZIP TITLE	8585 150TH ST	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE			995358 <b>o</b>
STREET ADDRESS CITY-ST-ZIP	8585 150TH ST		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			1085368 <b>5</b> 40003 , <b>8</b> 50₹0
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	8585 150TH ST		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			10853580 40003, <b>8</b> 50 <b>3</b> 0 <b>6</b> hang 5 (2) Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	8585 150TH ST	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			10853580 40009 35070 86 hang 50 Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	8585 150TH ST	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	8585 150TH ST	Delete Delete Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			Change Addition  Change Addition  Change Addition  Addition  Addition  Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME THE	8585 150TH ST	Delete  Delete  Delete  Delete  Delete	NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  THE NAME STREET ADDRESS CITY-ST-ZIP  THE SAME STREET ADDRESS CITY-ST-ZIP  THE SAME STREET ADDRESS CITY-ST-ZIP	ntained in Chap	oter 119, Florida Statutes, der oath; that I am a mar Florida Statutes.	Change   Addition   Change   Change   Addition   Change   Change
STREET ADDRESS CITY-ST-ZIP TITLE NAME THE	ertify that the information supplied won this report is true and accurate arbility company or the receiver or trus	Delete  Delete  Delete  Delete  Delete  Delete	NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  THE exemptions counter same legal effereport as required to	ntained in Chap et as if made un by Chapter 608.	oter 119, Florida Statutes, der oath; that I am a mar Florida Statutes.	Change Addition  Change Addition  Change Addition  Change Addition