

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (RR)

FILED
Jun 13, 2006 8:00 am
Secretary of State

05-03-2006 90040 020 ****50.00

DOCUMENT # L05000075520 1. Entity Name BOATWRIGHT ENTERPRISE LLC																																																					
Principal Place of Business 83 SOUTH ROSCOE BLVD. PALM VALLEY FL 32082			Mailing Address 83 SOUTH ROSCOE BLVD. PALM VALLEY FL 32082																																																		
2. Principal Place of Business 83 South Roscoe Blvd Suite, Apt. #, etc.		3. Mailing Address Same As (#2) Suite, Apt. #, etc.																																																			
City & State Palm Valley, FL Zip 32082		City & State Florida Zip Country		4. FEI Number 261-88-3598 Applied For ☐ Not Applicable																																																	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				1st MOORE CR2E083 (10/05)																																																	
6. Name and Address of Current Registered Agent BOATWRIGHT, CY M 83 SOUTH ROSCOE BLVD. PALM VALLEY FL 32082			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number 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 <u><i>Cy M Boatwright</i></u> Cy M Boatwright (NOTE: Registered Agent signature required when reappointing) DATE _____																																																					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006																																																					
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%;"> OWNER/PRESIDENT Cy Boatwright 83 South Roscoe Blvd Palm Valley Fl. 32082 </td> <td style="text-align: right;">☐ Delete</td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY - ST - ZIP	OWNER/PRESIDENT Cy Boatwright 83 South Roscoe Blvd Palm Valley Fl. 32082	☐ Delete																						10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%;"> </td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY - ST - 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 Section 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: <u><i>Cy Boatwright</i></u> Cy Boatwright (04) 285-5889 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE																																																					