

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000082869

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: ELSIE RAITE OUTDOOR WORKS, LLC

## Current Principal Place of Business:

541 DELAWARE RD.  
DEFUNIAK SPRINGS, FL 32433

## New Principal Place of Business:

318 BLACKFOOT DRIVE  
DEFUNIAK SPRINGS, FL 32433 US

## Current Mailing Address:

541 DELAWARE RD.  
DEFUNIAK SPRINGS, FL 32433

## New Mailing Address:

318 BLACKFOOT DRIVE  
DEFUNIAK SPRINGS, FL 32433

FEI Number: 20-3338529

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAITE, ELSIE  
541 DELAWARE RD.  
DEFUNIAK SPRINGS, FL 32433 US

## Name and Address of New Registered Agent:

RAITE, ELSIE  
318 BLACKFOOT DRIVE  
DEFUNIAK SPRINGS, FL 32433 US

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.

SIGNATURE: ELSIE RAITE

04/27/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: RAITE, ELSIE  
Address: 541 DELAWARE RD.  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: RAITE, ELSIE  
Address: 318 BLACKFOOT DRIVE  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433 US

Title: MGR ( ) Change (X) Addition  
Name: WOOLF, TRAVIS  
Address: 3505 MELISSA LANE  
City-St-Zip: CRESTVIEW, FL 32539 US

Title: MGR ( ) Change (X) Addition  
Name: SYKES, JIMMY  
Address: 318 BLACKFOOT DRIVE  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433 US

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.

SIGNATURE: ELSIE RAITE

MGR

04/27/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date