


FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90019 046 ****50.00

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000092097			
1. Entity Name LFC TRADING, LLC			
Principal Place of Business 301 ANNA WILSON PLACE COCOA, FL 32927		Mailing Address 301 ANNA WILSON PLACE COCOA, FL 32927	
2. Principal Place of Business 2003 Hwy 177A Suite, Apt. #, etc.		3. Mailing Address 2003 Hwy 177A Suite, Apt. #, etc.	
City & State Bonifay, FL Zip 32425 Country US		City & State Bonifay, FL Zip 32425 Country US	
4. FEI Number 02-0752033		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		04172006 Chg-LLC CR2E083 (11/05)	
6. Name and Address of Current Registered Agent CRAMBLIT, LARRY 301 ANNA WILSON PLACE COCOA, FL 32927		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2003 Hwy 177A City Bonifay, FL Zip Code 32425	
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>Larry Cramblit</u> <u>Larry Cramblit</u> <u>4/24/06</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) 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 - ST - ZIP	MGRM CRAMBLIT, LARRY 301 ANNA WILSON PLACE COCOA, FL 32927 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CRAMBLIT, LARRY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2003 Hwy 177A Bonifay, FL 32425
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM RHOADS, RUTH 301 ANNA WILSON PLACE COCOA, FL 32927 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	RHOADS, RUTH <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2003 Hwy 177A Bonifay, FL 32425
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 608, Florida Statutes.			
SIGNATURE: <u>Larry Cramblit</u> <u>Larry Cramblit</u>		Date	Daytime Phone #