

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000106561

FILED
Mar 09, 2006
Secretary of State

Entity Name: ANTIGUA DECORATIVE PAVERS & WALLS, LLC

Current Principal Place of Business:

9890 NORTH HIGHWAY 301
WILDWOOD, FL 34785

New Principal Place of Business:

Current Mailing Address:

9890 NORTH HIGHWAY 301
WILDWOOD, FL 34785

New Mailing Address:

FEI Number: 33-1125490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THE MILLHORN LAW FIRM
13710 US HIGHWAY 441
SUITE 100
LADY LAKE, FL 32159 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ARZU, RICARDO A
Address: 661 BAINAN PLACE
City-St-Zip: THE VILLAGES, FL 32162

Title: MGRM () Delete
Name: SCOTT, PATRICIA
Address: 677 WINFRED WAY
City-St-Zip: THE VILLAGES, FL 32162

Title: MGRM () Delete
Name: AVELAR, ANDRES E
Address: 9890 NORTH HIGHWAY 301
City-St-Zip: WILDWOOD, FL 34785

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ARZU, RICARDO A
Address: 661 BAINAN PLACE
City-St-Zip: THE VILLAGES, FL 32162

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RICARDO A. ARZU

MGRM

03/09/2006

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