

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000113899

**FILED**  
**Apr 28, 2006**  
**Secretary of State**

**Entity Name:** LARRY MAYS CONTRACTOR, LLC

**Current Principal Place of Business:**

P.O. BOX 91803  
LAKELAND, FL 338041803

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 91803  
LAKELAND, FL 338041803

**New Mailing Address:**

**FEI Number:** 14-1949033

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

A1A REGISTERED AGENT INC  
92 SADBERRY RD  
QUINCY, FL 32351 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: MAYS, LARRY  
Address: PO BOX 91803  
City-St-Zip: LAKELAND, FL 338041803

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MAYS, LARRY  
Address: P.O. BOX 91803  
City-St-Zip: LAKELAND, FL 338041803

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:** LARRY MAYS

MGRM

04/28/2006

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