2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Jun 07, 2007 8:00 am
Secretary of State

05-09-2007 90029 014 ****50.00

DOCUMENT # L06000032963

1. Entity Name

RANKS DRYWALL LLC

Principal Place of Business	Mailing Address
1510 W ARIANA ST LOT 384 LAKELAND FL 33803	1510 W ARIANA ST LOT 384 LAKELAND FL 33803

1st MOORE CR2E083 (10/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
1510 W Ariana St		4023 N Florida Ave	
Suite, Apt. #, etc. Lakeland Fl		Suite, Apt. #, etc. Lakeland, Fl	
City & State 33803 -- Polk		City & State 33805 Polk	
Zip	Country	Zip	Country

4. FEI Number 204594726 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RANK, RICKEY
1510 W ARIANA ST LOT 384
LAKELAND FL 33803

7. Name and Address of New Registered Agent

Name Rickey Rank

Street Address (P.O. Box Number is Not Acceptable) 4023 N. Florida Ave

City Lakeland FL FL Zip Code 33805

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 [signature] 4/27/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2007

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RANK, RICKEY 1510 W ARIANA ST LOT 384 LAKELAND FL 33803	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: Rickey Rank [signature] 4/27/07 863 661-3558
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #