2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M0000001325

1. Entity Name

WARMACK AND COMPANY, L.L.C.

FILED Apr 19, 2005 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

30 MORRIS LANE

TEXARKANA, TX 75503-2115

30 Morris Lane Texarkana, TX 75503-2115



04062005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 75-2795888 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HOUCK, THOMAS C 312 S. HARBOR CITY BLVD. MELBOURNE, FL 32901

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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, 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, 2005

9.	MANAGING MEMBERS/MANAGERS
TITLE	Р
NAME	WARMACK, ED
STREET ADDRESS	30 MORRIS LANE
CITY-ST-ZIP	TEXARKANA, TX 75503
TITLE	V
NAME	WARMACK, GEORGE
STREET ADDRESS	30 MORRIS LANE
CITY - ST- ZIP	TEXARKANA, TX 75503
TITLE	V
NAME	WARMACK, JOHN
STREET ADDRESS	30 MORRIS LANE
C:TY-SY-ZIP	TEXARKANA, TX 75503
TITLE	V
NAME	WARMACK, JAMES
STREET ADDRESS	30 MORRIS LANE
CITY-ST-ZIP	TEXARKANA, TX 75503
TITLE	V
NAME	WARMACK, DANIEL
STREET ADDRESS	30 MORRIS LANE
CITY-ST-ZIP	TEXARKANA, TX 75503
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NAME	
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CITY-ST-ZIP	<u> </u>
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119,07(3)(i). 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

05

Daytime Phone s