2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2006 08:00 AM
Secretary of State

DOCUMENT # M00000001488

1. Entity Name
LTBB MARKETING, LLC

Principal Place of Business	Mailing Address
4150 S. LAPEER RD ORION, MI 48359	4150 S. LAPEER RD ORION, MI 48359

DO NOT WRITE IN THIS SPACE

02022006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
38-3519690
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BUSCH, GARY
60 OCEAN BLVD SUITE 5
ATLANTIC BEACH, FL 32233

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

U00000436067
02/27/06-80022-012 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	BUSCH, GARY
STREET ADDRESS	60 OCEAN BLVD SUITE 5
CITY-ST-ZIP	ATLANTIC BEACH, FL 32233
TITLE	MGR
NAME	BEENEN, GREG
STREET ADDRESS	60 OCEAN BLVD SUITE 5
CITY-ST-ZIP	ATLANTIC BEACH, FL 32233
TITLE	MGR
NAME	LYMTAL INTERNATIONAL, INC.
STREET ADDRESS	4150 S. LAPEER RD.
CITY-ST-ZIP	ORION, MI 48359
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _____ 2/13/06 904-246-4507
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #