

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 11, 2006 8:00 am
Secretary of State

09-11-2006 90092 041 ****50.00

DOCUMENT # M05000001980 1. Entity Name MICHAEL S. WORMALD TRUCKING LLC																					
Principal Place of Business 1734 S.W. HARBORHILL ROAD DUNNELLON, FL 34431		Mailing Address 1734 S.W. HARBORHILL ROAD DUNNELLON, FL 34431 P.O. Box 111 CEDAR KEY, FL. 32625																			
2. Principal Place of Business 8851 S.W. 347		3. Mailing Address P.O. Box 111																			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 																			
City & State CEAR KEY, FL.		City & State CEAR KEY, FL																			
Zip 32625		Zip 32625																			
Country LEVY		Country LEVY																			
4. FEI Number 04-3357457		Applied For ☐ Not Applicable																			
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required																			
6. Name and Address of Current Registered Agent INCORPORATING SERVICES, LTD. 1540 GLENWAY DRIVE TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																			
8. The above named entity submits this statement for the purpose of changing, is registered office or registered agent or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>Michael S. Wormald</u> 8-24-06 Signature: typed or printed name of registered agent and the taxpayer (if the registered agent is not the taxpayer) DATE																					
Filing Fee is \$50.00 Due by September 6, 2006		Make check payable to Florida Department of State																			
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 80%;">MGR WORMALD, MICHAEL S</td> <td style="width: 10%; text-align: right;">Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td>1734 S.W. HARBORHILL ROAD</td> <td></td> </tr> <tr> <td>CITY, ST, ZIP</td> <td>DUNNELLON, FL 34431</td> <td></td> </tr> </table>		TITLE	MGR WORMALD, MICHAEL S	Delete	STREET ADDRESS	1734 S.W. HARBORHILL ROAD		CITY, ST, ZIP	DUNNELLON, FL 34431		10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 80%;">MGR WORMALD, MICHAEL S</td> <td style="width: 10%; text-align: right;">Addition ☒</td> </tr> <tr> <td>STREET ADDRESS</td> <td>P.O. Box 111</td> <td></td> </tr> <tr> <td>CITY, ST, ZIP</td> <td>CEAR KEY, FL. 32625</td> <td></td> </tr> </table>		TITLE	MGR WORMALD, MICHAEL S	Addition ☒	STREET ADDRESS	P.O. Box 111		CITY, ST, ZIP	CEAR KEY, FL. 32625	
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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 I 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: <u>Michael S. Wormald</u> 8-24-06 3523427905 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE DATE DAYTIME PHONE #																					

ATTACHMENT
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~~#N105000001980~~

I'm Sorry I'm
Late Sending in
my fee for Renewal.
I JUST RECEIVED THIS
NOTICE A SHORT TIME
AGO, DUE TO THE
FACT THAT I HAD
MOVED.

Many Thanks,
Michael Womell