2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M05000006727

AULD & WHITE INVESTMENT, LLC

Principal Place of Business

TITLE NAME STREET ADDRESS City-ST-ZIP **3J717** NAME STREET ADDRESS CHY-ST-21P

Mailing Address

4168 SOUTHPOINT PARKWAY, SUITE 101 JACKSONVILLE, FL 32216

4168 SOUTHPOINT PARKWAY, SUITE 101 JACKSONVILLE, FL 32216

FILED Apr 03, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03142006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3774479 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RUSHING, ROBERT K 1515 RIVERSIDE AVENUE, SUITE A JACKSONVILLE, FL 32204			DO NOT WRITE IN THIS SPACE	
	a named entity submits this statement for the purpose of chattons of registered agent.	anging its registered office or registered agent, or both	n, in the State of Florida, I am familiar with, and accept	
SIGNATURE.	Signature, typed or printled name of registered agent and title if applicable	(NOTE: Registered Agen) signature required when refrestating)	OATE	
Fi O	iling Fee is \$50.00 ue by May 1, 2006		·	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AULD & WHITE MANAGEMENT, INC. 4168 SOUTHPOINT PARKWAY, SUITE 101 JACKSONVILLE, FL 32116		U00000430018 04/18/06-80033-008 55.0	
TOTLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-SI-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		T NI	HIS SPACE	

11. I hereby certify that the information supplied with this filling 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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes