

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # M97000000015

1. Entity Name
W. R. FAIRCHILD CONSTRUCTION COMPANY, LLC



Principal Place of Business
HIGHWAY 49 N.
HATTIESBURG, MS 39402

Mailing Address
P.O. BOX 15909
HATTIESBURG, MS 39404-5909



01092006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
64-0328283

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BAKER, JAMES E
1520 LIVE OAK ROAD
MONTICELLO, FL 32344

**DO NOT WRITE
IN THIS SPACE**

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, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
FAIRCHILD, MARK A
11 ABBEYWOOD LANE
HATTIESBURG, MS 39402

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
FAIRCHILD, JOHN M
1009 LAKESHORE DR.
HATTIESBURG, MS 39401

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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02/14/06-80034-016 55.00

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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 606, Florida Statutes.

SIGNATURE: **MARK A. FAIRCHILD**

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

Date

601-544-1151

Daytime Phone #