2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Mar 08, 2006 8:00 am Secretary of State DOCUMENT # M98000000181 03-08-2006 90041 026 ****55 00 1. Entity Name DEWAR GENERAL, L.L.C. Principal Place of Business Mailing Address 20013975 2409 BEMISS ROAD 2409 BEMISS ROAD VALDOSTA, GA 31604 VALDOSTA, GA 31604 CR2E083 (11/05) 02272006 No Chg-LLC Applied For 4. FEI Number 58-2237438 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD IN THIS SPACE PLANTATION, FL 33324 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, broad or project name of registered egent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. TITLE DEWAR, JAMES L JR. NAME STREET ADDRESS 2409 BEMISS ROAD VALDOSTA, GA 31604 CITY-ST-ZIP TELLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP & NAME STREET ADDRESS CITY-ST-ZIP

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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

> JL. Dewar, PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/27/06

FILED