


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 23, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000034144 1. Entity Name ACE CONSTRUCTORS, LLC	
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Principal Place of Business 4420 NW 36TH AVENUE GAINESVILLE, FL 32606	Mailing Address P.O. BOX 357490 GAINESVILLE, FL 32635
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DO NOT WRITE IN THIS SPACE



03102004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 02-0657399	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FORNERIS, ANTONE L
 6331 NW 16 PLACE
 GAINESVILLE, FL 32605

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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 _____ (NOTE: Registered Agent signature required when reestablishing) DATE _____

Filing Fee is \$50.00 Due by May 1, 2004

000000094575
 03/23/04-80002-003 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FULKERSON, JOHN R 16603 SW 5 PLACE NEWBERRY, FL 32669
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FORNERIS, ANTONE L 6331 NW 16 PLACE GAINESVILLE, FL 32605
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #