2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2004
Secretary of State

DOCUMENT# L03000055253

Entity Name: A-1 PROFESSIONAL ASPHALT LLC

Current Principal Place of Business:

215 KIRTLAND
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

215 KIRTLAND
NAPLES, FL 34110

New Mailing Address:

FEI Number: 56-2428206 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FOSTH ACCOUNTING PA
1008 GOODLETTE RD
201
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: QUIRIN, THOMAS M
Address: 215 KIRTLAND
City-St-Zip: NAPLES, FL 34110 US

Title: MGRM ( ) Delete
Name: COHEN, PATRICIA A
Address: 2650 RANDALL BLVD
City-St-Zip: NAPLES, FL 34120 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM ( ) Change (X) Addition
Name: QUIRIN, DELORES H
Address: 215 KIRTLAND
City-St-Zip: NAPLES, FL 34110 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: THOMAS M QUIRIN MGRM 03/19/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date