

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000012405

Entity Name: SUN COAST BUILDERS, LLC

FILED
Jul 03, 2005
Secretary of State

Current Principal Place of Business:

1609 BALLANTRAE BLVD NORTH
PORT ST LUCIE, FL 34952

New Principal Place of Business:

1609 S.E.BALLANTRAE BLVD NORTH
PORT ST LUCIE, FL 34952

Current Mailing Address:

1609 BALLANTRAE BLVD NORTH
PORT ST LUCIE, FL 34952

New Mailing Address:

1609 S.E.BALLANTRAE BLVD NORTH
PORT ST LUCIE, FL 34952

FEI Number: 32-0018242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GENOVESE, VINCENT
1609 BALLANTRAE BLVD NORTH
PORT ST LUCIE, FL 34952 US

Name and Address of New Registered Agent:

GENOVESE, VINCENT
1609 S.E.BALLANTRAE BLVD NORTH
PORT ST LUCIE, FL 34952 US

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: _____

07/03/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GENOVESE, VINCENT
Address: 1609 S.E. BALLANTRAE BLVD N.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: MGRM () Delete
Name: CHIAROLANZIO, CHRISTINA
Address: 1609 S.E. BALLANTRAE BLVD., N.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: MGRM () Delete
Name: PANACHIO, ELAINE
Address: 1649 S.E. BALLANTRAE BLVD. N.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: MGRM () Delete
Name: PENACHIO, ERNIE
Address: 1649 S.E. BALLANTRAE BLVD. N.
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: CHIAROLANZIO, CHRISTINA
Address: 1609 S.E. BALLANTRAE BLVD., N.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: MGR (X) Change () Addition
Name: PENACHIO, ELAINE
Address: 1649 S.E. BALLANTRAE BLVD. N.
City-St-Zip: PORT SAINT LUCIE, FL 34952

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

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: VINCENT GENOVESE

MGRM

07/03/2005

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