

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019918

FILED
Jan 05, 2004
Secretary of State

Entity Name: FARR CREST EXCAVATING, LLC

Current Principal Place of Business:

2090 MYAKKA ROAD
SARASOTA, FL 34240

New Principal Place of Business:

15910 RAWLS ROAD
SARASOTA, FL 342409682

Current Mailing Address:

2090 MYAKKA RD.
SARASOTA, FL 342408110

New Mailing Address:

15910 RAWLS RD
SARASOTA, FL 342409682

FEI Number: 52-2369876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIDDELL, JEFFERSON F
3400 S. TAMIAMI TRAIL
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

FARR, PAIGE
15910 RAWLS ROAD
SARASOTA, FL 342409682 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: PAIGE FARR

01/05/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: FARR, JOSEPH
Address: 2090 MYAKKA ROAD
City-St-Zip: SARASOTA, FL 34240 US

Title: MGR () Delete
Name: FARR, PAIGE
Address: 2090 MYAKKA ROAD
City-St-Zip: SARASOTA, FL 34240 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FARR, JOSEPH
Address: 15910 RAWLS ROAD
City-St-Zip: SARASOTA, FL 342409682 US

Title: MGR (X) Change () Addition
Name: FARR, PAIGE
Address: 15910 RAWLS ROAD
City-St-Zip: SARASOTA, FL 342409682 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: PAIGE FARR

MGR

01/05/2004

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