2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000026524

Entity Name: MOREHOPE CONSTRUCTION MANAGEMENT LLC

Current Principal Place of Business:	**New Principal Place of Business:**
3388 PINETREE ST PORT CHARLOTTE, FL 33952 US	17082 EDGEWATER DR PORT CHARLOTTE, FL 33948 US
Current Mailing Address:	**New Mailing Address:**
3388 PINETREE ST PORT CHARLOTTE, FL 33952 US	P O BOX 496452 PORT CHARLOTTE, FL 33953 US

FEI Number: 20-2406899   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
WESTFIELD, PETER 3388 PINETREE ST PORT CHARLOTTE, FL 33952 US	WESTFIELD, PETER 17082 EDGEWATER DR PORT CHARLOTTE, FL 339548 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: _____   10/02/2006
                        Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:

		ADDITIONS/CHANGES:	
Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	WESTFIELD, PETER	Name:	WESTFIELD, PETER
Address:	3388 PINETREE ST	Address:	17082 EDGEWATER DR
City-St-Zip:	PORT CHARLOTTE, FL 33952 US	City-St-Zip:	PORT CHARLOTTE, FL 33948 US
Title:	( ) Delete	Title:	MGR ( ) Change (X) Addition
Name:		Name:	WESTFIELD, LYNN
Address:		Address:	17082 EDGEWATER DR
City-St-Zip:		City-St-Zip:	PORT CHARLOTTE, FL 33948

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: PETER M. WESTFIELD   MGRM   10/02/2006
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date