2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000030311

1. Entity Name
PHOENIX CONSTRUCTION & FENCING, L.L.C.

Principal Place of Business	Mailing Address
538 E. PARK AVENUE, SUITE 102 TALLAHASSEE, FL 32301	538 E. PARK AVENUE, SUITE 102 TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

02082007No Chg-LLC CR2E083 (11/05)

4. FEI Number
22-3883000
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

KNOWLES, HAROLD M
538 E. PARK AVENUE, SUITE 102
TALLAHASSEE, FL 32301

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	KNOWLES, HAROLD M
STREET ADDRESS	538 E. PARK AVENUE, SUITE 102
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	MGR
NAME	WALLACE, MICHAEL D
STREET ADDRESS	538 E. PARK AVENUE, SUITE 102
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	MGR
NAME	BOWERS, THOMAS K
STREET ADDRESS	538 E. PARK AVENUE, SUITE 102
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/21/07-80042-006 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ 2/9/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #