

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000032636

FILED  
Jan 25, 2005  
Secretary of State

Entity Name: LIVINGSTONES CONSTRUCTION, LLC

**Current Principal Place of Business:**

4221 SILVER PINE  
KISSIMMEE, FL 34746

**New Principal Place of Business:**

4221 SILVER PINE STREET  
KISSIMMEE, FL 34746

**Current Mailing Address:**

4221 SILVER PINE  
KISSIMMEE, FL 34746

**New Mailing Address:**

4221 SILVER PINE STREET  
KISSIMMEE, FL 34746

FEI Number: 06-1685717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CONNIS, MICHAEL  
4221 SILVER PINE  
KISSIMMEE, FL 34746 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: MILLIGAN, STEVEN M  
Address: 2413 NIGHTINGALE LN.  
City-St-Zip: KISSIMMEE, FL 34746

Title: MGRM ( ) Delete  
Name: GOSZLOTH, LOUIS J  
Address: 2715 HAM BROWN RD.  
City-St-Zip: KISSIMMEE, FL 347463415

Title: MGRM ( ) Delete  
Name: CONNES, MICHAEL  
Address: 4221 SILVER PINE ST.  
City-St-Zip: KISSIMMEE, FL 34746

**ADDITIONS/CHANGES:**

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

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

Title: MGRM (X) Change ( ) Addition  
Name: CONNIS, MICHAEL  
Address: 4221 SILVER PINE ST.  
City-St-Zip: KISSIMMEE, FL 34746

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: MIKE CONNIS

MGRM

01/25/2005

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