

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 29, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000033824

1. Entity Name
MORTON L. LIVINGSTON CONSTRUCTION, L.L.C.



Principal Place of Business
7279 WEST SENATE STREET
FORT OGDEN, FL 34267

Mailing Address
P.O. BOX 5
FORT OGDEN, FL 34267



01262004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
42-1561866

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SICA, VINCENT A
10 S. DESOTO AVENUE, SUITE 101
ARCADIA, FL 34266

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
LIVINGSTON, MORTON L
PO BOX 5, 7279 W. SENATE ST.
FORT OGDEN, FL 34267

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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U00000021122
01/29/04-80095-002 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Morton L. Livingston* **MORTON L. LIVINGSTON** 1-26-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #