

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003047

FILED
Feb 18, 2004
Secretary of State

Entity Name: FLORIDA CONSTRUCTION SERVICES LLC

Current Principal Place of Business:

2503 DEL PRADO BLVD., SUITE 300
CAPE CORAL, FL 33904

New Principal Place of Business:

12570 METRO PARKWAY #2
FORT MYERS, FL 33912

Current Mailing Address:

2503 DEL PRADO BLVD., SUITE 300
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 35-2193793 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

FINK & BOYLE
2030 MCGREGOR BLVD
FORT MYERS, FL 33901 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: MARK BOYLE

02/18/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: BERTH, KEVIN J
Address: 2503 DEL PRADO BLVD., STE 300
City-St-Zip: CAPE CORAL, FL 33904

Title: MGRM () Delete
Name: HERMANN, FRED
Address: 2503 DEL PRADO BLVD., STE 300
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BERTH, KEVIN J
Address: 1684 MCGREGOR RESERVE DRIVE
City-St-Zip: FORT MYERS, FL 33901

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

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: KEVIN J. BERTH

MGRM

02/18/2004

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