

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003868

Entity Name: SUNCOAST STONeworks, LLC

FILED  
Jan 05, 2006  
Secretary of State

**Current Principal Place of Business:**

2946 SOUTH ST.  
FT. MYERS, FL 33916

**New Principal Place of Business:**

**Current Mailing Address:**

2946 SOUTH ST.  
FT. MYERS, FL 33916

**New Mailing Address:**

FEI Number: 13-4236397

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIRES, TIMOTHY L  
1423 DAVIS DR.  
FORT MYERS, FL 33919 US

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

WILCOX, CARI L  
6591 ST. IVES COURT  
FORT MYERS, FL 33912 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: CARI L WILCOX

01/05/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WILCOX, CARI  
Address: 6591 ST. IVES CT.  
City-St-Zip: FORT MYERS, FL 33912

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: MGR ( ) Change (X) Addition  
Name: REED, RANSOM  
Address: 3370 ESTERO BLVD.  
City-St-Zip: FORT MYERS BEACH, FL 33931

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: CARI L WILCOX

MGRM

01/05/2006

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