

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003868

Entity Name: SUNCOAST STONEWORKS, LLC

FILED
Jun 20, 2007
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 ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

WILCOX, CARI L
6591 ST. IVES COURT
FORT MYERS, FL 33966 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: _____

06/20/2007

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WILCOX, CARI
Address: 6591 ST. IVES CT.
City-St-Zip: FORT MYERS, FL 33966

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

I hereby certify that the information supplied with this filing does not qualify 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 WILCOX

MGRM

06/20/2007

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