


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 26, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000023040 1. Entity Name JOHNSON-FERREIRA BUILDERS LLC	
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Principal Place of Business 407 SOUTH COLLEGE STREET MACLENNY, FL 32063	Mailing Address 407 SOUTH COLLEGE STREET MACLENNY, FL 32063
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04132005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 87-0700841	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent FERREIRA, V. TODD 407 SOUTH COLLEGE STREET MACLENNY, FL 32063	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature: typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHNSON, STEVE 1216 SWEETBRIAR LANE NORTH YULEE, FL 32097
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FERREIRA, V. TODD 250 NORTH LOWDER ST MACLENNY, FL 32063
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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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: V. Todd Ferreira 4-18-2005 904-259-5700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #