2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED Apr 20, 2005 08:00 AM Secretary of State DOCUMENT # L03000023360 EAGLE CONSTRUCTION SERVICES, LLC Mailing Address Principal Place of Business 1800 MARINA CIRCLE 1800 MARINA CIRCLE NORTH FORT MYERS, FL 33903 NORTH FORT MYERS, FL 33903 02212005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 86-1070866 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KELLY, DANIEL DO NOT WRITE 1800 MARINA CIRCLE NORTH FORT MYERS, FL 33903 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 of printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstalling) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE KELLY, DANIEL M NAME U00000318422 04/20/05-80057-016 50.00 STREET ADDRESS 1800 MARINA CIRCLE CITY - ST-ZIP NORTH FORT MYERS, FL 33903 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP mu NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling does not qualify 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 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 true tee entroy end to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #