2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 25, 2004
Secretary of State

DOCUMENT# L03000029217

Entity Name: ESTATE BUILDERS LLC

Current Principal Place of Business:

6451 ST RD 80
ALVA, FL 33920 US

New Principal Place of Business:

Current Mailing Address:

6451 ST RD 80
ALVA, FL 33920 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THIVIERGE, VALERIE L
6451 ST RD 80
ALVA, FL 33920 US

Name and Address of New Registered Agent:

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: ____________________
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: THIVIERGE, VALERIE L
Address: 17310 N. RIVER RD
City-St-Zip: ALVA, FL 33920 US

Title: MGR ( ) Delete
Name: THIVIERGE, ALBERT J
Address: 17310 N. RIVER RD
City-St-Zip: ALVA, FL 33920 US

Title: MGR ( ) Delete
Name: SKATES, TERRY G
Address: 4785 SKATES CIRCLE
City-St-Zip: FT. MYERS, FL 33905 US

ADDITIONS/CHANGES:

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

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

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: VALERIE THIVIERGE MGR 05/25/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date