

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032178

**FILED**  
**Apr 15, 2005**  
**Secretary of State**

**Entity Name:** HUFHAM/FARRIS CONSTRUCTION, LLC

**Current Principal Place of Business:**

7020 FAIN PARK DRIVE  
SUITE 7  
MONTGOMERY, AL 36117

**New Principal Place of Business:**

**Current Mailing Address:**

7020 FAIN PARK DRIVE  
SUITE 7  
MONTGOMERY, AL 36117

**New Mailing Address:**

**FEI Number:** 43-2002556      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: FARRIS, ROBERT D  
Address: 7020 FAIN PARK DRIVE, SUITE 7  
City-St-Zip: MONTGOMERY, AL 36117

Title: MGR      ( ) Delete  
Name: HUFHAM, MARK C  
Address: 7020 FAIN PARK DRIVE, SUITE 7  
City-St-Zip: MONTGOMERY, AL 36117

**ADDITIONS/CHANGES:**

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: ROBERT D. FARRIS

MEMB

04/15/2005

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