

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042338

FILED
May 04, 2004
Secretary of State

Entity Name: GOPHERWOOD CONSTRUCTION, LLC

Current Principal Place of Business:

15251 YELLOW BLUFF ROAD
JACKSONVILLE, FL 32226

New Principal Place of Business:

Current Mailing Address:

15251 YELLOW BLUFF ROAD
JACKSONVILLE, FL 32226

New Mailing Address:

FEI Number: 20-0357048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONARCH MINISTRIES, INC.
15251 YELLOW BLUFF ROAD
JACKSONVILLE, FL 32226 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: LEGGETT, MAX H
Address: 15251 YELLOW BLUFF ROAD
City-St-Zip: JACKSONVILLE, FL 32226

Title: MGR () Delete
Name: SEWELL, AMY E
Address: 15251 YELLOW BLUFF ROAD
City-St-Zip: JACKSONVILLE, FL 32226

Title: MGR () Delete
Name: BENJAMIN, KIMBERLY A
Address: 1862 COLBY AVENUE
City-St-Zip: JACKSONVILLE, FL 32218

Title: MGRM () Delete
Name: SEWELL, ROBERT B
Address: 15251 YELLOW BLUFF ROAD
City-St-Zip: JACKSONVILLE, FL 32226

Title: MGRM () Delete
Name: BENJAMIN, DAVID
Address: 1862 COLBY AVENUE
City-St-Zip: JACKSONVILLE, FL 32218

Title: MGRM () Delete
Name: LEGGETT, ELIZABETH M
Address: 15251 YELLOW BLUFF ROAD
City-St-Zip: JACKSONVILLE, FL 32226

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:

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

Title: () Change () Addition
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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: AMY E SEWELL

MGR

05/04/2004

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