2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043798

Entity Name: STEVEN SERGIS BUILDER, LLC.

FILED Jul 24, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5565 SCHENK AVENUE STE 12 ROCKLEDGE, FL 32955

Current Mailing Address: New Mailing Address:

1225 STARLING WAY
ROCKLEDGE, FL 32955
ROCKLEDGE, FL 32955

FEI Number: 05-0568859 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SERGIS, STEVEN P
1225 STARLING WAY
ROCKLEDGE, FL 32955 US
SERGIS, STEVEN P
6233 HALYARD COURT
ROCKLEDGE, FL 32955 US

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: 07/24/2005

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 SERGIS, STEVEN P
 Name:
 SERGIS, STEVEN P

 Address:
 1225 STARLING WAY
 Address:
 6233 HALYARD COURT

 City-St-Zip:
 ROCKLEDGE, FL 32955
 City-St-Zip:
 ROCKLEDGE, FL 32955

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 SERGIS, TIFFANY T
 Name:

 Address:
 1225 STARLING WAY
 Address:

 City-St-Zip:
 ROCKLEDGE, FL 32955
 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: STEVEN SERGIS MGR 07/24/2005