
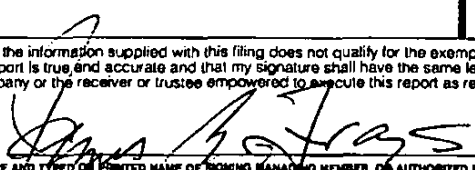


FILED
May 25, 2005 8:00 am
Secretary of State

05-02-2005 90089 044 ****50.00

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L03000044531		
1. Entity Name BROCK FRAZIER CONSTRUCTION COMPANY, LLC		
Principal Place of Business 4341 THOMAS DRIVE PANAMA CITY BEACH, FL 32408		Mailing Address 4341 THOMAS DRIVE PANAMA CITY BEACH, FL 32408
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent FRAZIER, JAMES B 4341 THOMAS DRIVE PANAMA CITY BEACH, FL 32408		DO NOT WRITE IN THIS SPACE
B. 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing)</small>		
Filing Fee is \$50.00 Due by May 1, 2005		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE	MGRM	
NAME	FRAZIER, JAMES B	
STREET ADDRESS	4341 THOMAS DRIVE	
CITY - ST - ZIP	PANAMA CITY BEACH, FL 32408	
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
11. I hereby certify that the information supplied with this filing 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.		
SIGNATURE: 		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date</small> _____ <small>Daytime Phone #</small> _____

30007463



03212005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number

20-0873108

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required