



2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 AUG -1 AM 9:38

DOCUMENT # L03000045204 1. Entity Name NUNEZ REED BUILDER'S GROUP, LLC	
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Principal Place of Business 444 WEST PIPKIN RD. LAKELAND, FL 33813	Mailing Address 444 WEST PIPKIN RD LAKELAND, FL 33813
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DO NOT WRITE IN THIS SPACE

	
06282005 No Chg-LLC	CR2E083 (10/03)
4. FEI Number 76-0748571	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent NUNEZ, ROBERT JR. 444 WEST PIPKIN RD LAKELAND, FL 33813
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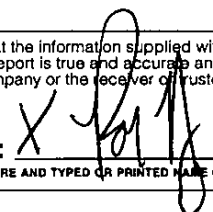
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>
DATE _____

Filing Fee is \$50.00 Due by September 7, 2005

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR NUNEZ, ROBERT JR. 444 WEST PIPKIN RD LAKELAND, FL 33813
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR NUNEZ, ROBERT F 444 WEST PIPKIN RD LAKELAND, FL 33813
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR REED, WILLIAM G 444 WEST PIPKIN RD LAKELAND, FL 33813
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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>