

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 18, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000047570 1. Entity Name DAN MOWEN CONSTRUCTION LLC	
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Principal Place of Business 296 S. SAMSULA DR. NEW SMYRNA BEACH, FL 32168 US	Mailing Address 296 S. SAMSULA DR. NEW SMYRNA BEACH, FL 32168 US
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DO NOT WRITE IN THIS SPACE



07122005 No Chg-LLC CR2E083 (10/03)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GEORGE, SMITH C JR.
3512 OMNIC CIRCLE
EDGEWATER, FL 32141

**DO NOT WRITE
IN THIS SPACE**

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 _____
(Signature is not printed name of registered agent and is not applicable. (NOTE: Registered Agent Signature required with the filing.) DATE _____

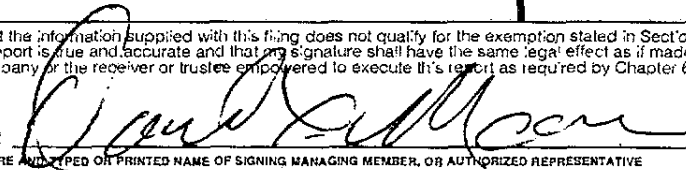
**Filing Fee is \$50.00
Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY ST ZIP	MGR MOWEN, DANIEL 296 S. SAMSULA NEW SMYRNA BEACH, FL 32168
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07/18/05-80006-010 50.00

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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)(c), 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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE