2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000047831

1. Entity Name

WILEY SHIREY CONSTRUCTION, LLC



FILED
May 03, 2005 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

3165 AUBURN RD CRESTVIEW, FL 32539 3165 AUBURN RD CRESTVIEW, FL 32539



05022005No Chg-LLC

CR2E083 (10/03)

Daytime Phone #

4. FEI Number 20-0426700		Applied For Not Applicable
5. Certificate of Status Desired	\$5.00	Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BRYAN, JOHN C JR WALTON & WILLIAMSON PA 1020 S FERDON BLVD CRESTVIEW, FL 32536

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chang ons of registered agent.	ging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
Filing Fee is \$50.00 Due by September 7, 2005				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHIREY, WILEY J JR. 6135 AUBURN RD CRESTVIEW, FL 32539		U00000361154 05/05/05-80054-009 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filling 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.				