


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2008 08:00 A
Secretary of State

DOCUMENT # L03000047966 1. Entity Name CHARLES S. WOMBLE MASONRY, LLC	
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Principal Place of Business 5228 PIMLICO DRIVE TALLAHASSEE, FL 32309	Mailing Address 5228 PIMLICO DRIVE TALLAHASSEE, FL 32309
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DO NOT WRITE IN THIS SPACE



03272008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 58-1156860	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

WOMBLE, CHARLES S SR.
5228 PIMLICO DRIVE
TALLAHASSEE, FL 32309

**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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WOMBLE, CHARLES S SR. 5228 PIMLICO DR. TALLAHASSEE, FL 32309
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04/10/08 80116 883 138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Charles S. Womble 3/28/08 850-893-1661
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #