

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000048041

FILED
Apr 20, 2005
Secretary of State

Entity Name: JUNE'S CONCRETE CO., LLC

Current Principal Place of Business:

231 N OLD CORRY FIELD RD
PENSACOLA, FL 32506

New Principal Place of Business:

Current Mailing Address:

231 N OLD CORRY FIELD RD
PENSACOLA, FL 32506

New Mailing Address:

FEI Number: 59-3277891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROCKWELL ACCOUNTING, LLC
9015 BOWMAN AVE
PENSACOLA, FL 32534 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: QUIZON, REGINO D JR
Address: 231 N OLD CORRY FIELD RD
City-St-Zip: PENSACOLA, FL 32506

Title: MGRM () Delete
Name: QUIZON, LENYROSE C
Address: 231 N OLD CORRY FIELD RD
City-St-Zip: PENSACOLA, FL 32534

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: QUIZON, LENYROSE C
Address: 231 N OLD CORRY FIELD RD
City-St-Zip: PENSACOLA, FL 32506

Title: MGRM () Change (X) Addition
Name: QUIZON, JOANA
Address: 231 N OLD CORRY FIELD RD
City-St-Zip: PENSACOLA, FL 32506

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: LENYROSE QUIZON

MGRM

04/20/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date