

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049889

FILED
Jan 09, 2008
Secretary of State

Entity Name: GULF COAST SUB-CONTRACTORS, LLC

Current Principal Place of Business:

502 KING LAKE BLVD.
DEFUNIAK SPRINGS, FL 32433

New Principal Place of Business:

502 KINGS LAKE BLVD.
DEFUNIAK SPRINGS, FL 32433

Current Mailing Address:

502 KING LAKE BLVD.
DEFUNIAK SPRINGS, FL 32433

New Mailing Address:

502 KINGS LAKE BLVD.
DEFUNIAK SPRINGS, FL 32433

FEI Number: 20-0443376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ODOM, JAMES L
502 KING LAKE BLVD
DEFUNIAK SPRINGS, FL 32433 US

Name and Address of New Registered Agent:

ODOM, JAMES L
502 KINGS LAKE BLVD
DEFUNIAK SPRINGS, FL 32433 US

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:

01/09/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ODOM, JAMES L
Address: 502 KING LAKE BLVD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ODOM, JAMES L
Address: 502 KINGS LAKE BLVD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAMES L. ODOM

MAN

01/09/2008

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