

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000050091

FILED
Jan 13, 2004
Secretary of State

Entity Name: WATKINS CONSTRUCTION & ROOFING L.L.C.

Current Principal Place of Business:

PO BOX 831
BONIFAY, FL 32425

New Principal Place of Business:

Current Mailing Address:

PO BOX 831
BONIFAY, FL 32425

New Mailing Address:

FEI Number: 68-0127399

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATKINS, MARK
2946 SAND PATH RD.
BONIFAY, FL 32425 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: MGR () Delete
Name: WATKINS, MARK
Address: PO BOX 831
City-St-Zip: BONIFAY, FL 32425

Title: MGRM () Delete
Name: WATKINS, MATTHEW
Address: PO BOX 831
City-St-Zip: BONIFAY, FL 32425

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

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: FORTUNE, LOUIE D
Address: 2974 SAND PATH RD.
City-St-Zip: BONIFAY, FL 32425

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: LOUIE DON FORTUNE

MGRM

01/13/2004

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