


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 19, 2006 8:00 am
Secretary of State

07-07-2006 90064 005 ****50.00

DOCUMENT # L03000050423 1. Entity Name MARK STEVENS CUSTOM MASONRY LLC	
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Principal Place of Business 60 NORTH RIDGEWOOD AVE ORMOND BEACH, FL 32174	Mailing Address 60 NORTH RIDGEWOOD AVE ORMOND BEACH, FL 32174
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DO NOT WRITE IN THIS SPACE

30012066



07032006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 55-0851639	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

STEVENS, MARK
60 NORTH RIDGEWOOD AVE
ORMOND BEACH, FL 32174

**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 MARK STEVENS CUSTOM MASONRY LLC Mark Stevens 7-03-06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing) DATE

**Filing Fee is \$50.00
Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STEVENS, MARK 60 NORTH RIDGEWOOD AVE ORMOND BEACH, FL 32174
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**DO NOT WRITE
IN THIS SPACE**

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: Mark Stevens MARK STEVENS 7-13-06 386-212-0354
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #