

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000050521 1. Entity Name T.M. TOOHEY, GENERAL CONTRACTOR LLC			
Principal Place of Business 3125 BARRETT AVE NAPLES, FL 34112		Mailing Address PO BOX 10488 NAPLES, FL 34101	
DO NOT WRITE IN THIS SPACE			
		01102005No Chg-LLC CR2ED83 (10/03)	
4. FEI Number 20-0472415		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent TOOHEY, THOMAS M 3125 BARRETT AVE NAPLES, FL 34112		DO NOT WRITE IN THIS SPACE	
11. 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 submitting)			
Filing Fee is \$30.00 Due by May 1, 2005		000000151041 01/24/05-80159-006 50.00	
11. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGR TOOHEY, THOMAS M 3125 BARRETT AVE NAPLES, FL 34112		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 606, Florida Statutes.			
SIGNATURE: <u>Thomas M. Tohey</u> THOMAS M. TOOHEY		1/12/05 239-774-2720	
SHOULDER AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	