2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 31, 2005
Secretary of State

DOCUMENT# L03000050759

Entity Name: WILLIAM F. JACKSON FRAMING, LLC

Current Principal Place of Business:

6528 NORDE DRIVE SOUTH
JACKSONVILLE, FL 32244

New Principal Place of Business:

Current Mailing Address:

6528 NORDE DRIVE SOUTH
JACKSONVILLE, FL 32244

New Mailing Address:

FEI Number: 20-0516377 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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:	JACKSON, WILLIAM F SR.	
Address:	6528 NORDE DRIVE SOUTH	
City-St-Zip:	JACKSONVILLE, FL 32244	
Title:	MGR	( ) Delete
Name:	JACKSON, WILLIAM F JR.	
Address:	6528 NORDE DRIVE SOUTH	
City-St-Zip:	JACKSONVILLE, FL 32244	
Title:	MGR	(X) Delete
Name:	BONHAM, JOSEPH	
Address:	6528 NORDE DRIVE SOUTH	
City-St-Zip:	JACKSONVILLE, FL 32244	

ADDITIONS/CHANGES:

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

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: WILLIAM F. JACKSON, SR. MGR 01/31/2005

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