2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2005
Secretary of State

DOCUMENT# L03000054384

Entity Name: PERRY CONSTRUCTION LLC

Current Principal Place of Business:

1705 WILMAR AVE
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

1705 WILMAR AVE
TARPON SPRINGS, FL 34689 US

New Mailing Address:

FEI Number: 04-3796564 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PERRY, MICHAEL A
1705 WILMAR AVE.
TARPON SPRINGS, FL 34689 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: MGRM ( ) Delete
Name: PERRY, MICHAEL A
Address: 1705 WILMAR AVE
City-St-Zip: TARPON SPRINGS, FL 34689 US

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

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

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: PERRY, MICHAEL A
Address: 1705 WILMAR AVE
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: MGRM ( ) Change (X) Addition
Name: BURNS, JEFFREY
Address: 24479 US 19 N. LOT 1112
City-St-Zip: CLEARWATER, FL 33763 US

Title: MGRM ( ) Change (X) Addition
Name: WEIDNER, GARY
Address: 6009 71ST. STREET N.
City-St-Zip: KENNETH CITY, FL 33709 US

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: MICHAEL A. PERRY MGR 02/23/2005

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