


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

02-11-2008 90138 022 ***138.75

DOCUMENT # L03000055121	
1. Entity Name J.E. CHANEY CONSTRUCTION LLC	

Principal Place of Business 800 KAY BLVD NE 5005 BRADENTON, FL 34212	Mailing Address 800 KAY BLVD NE 5005 BRADENTON, FL 34212
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2. Principal Place of Business - No P.O. Box # 800 Kay Rd. N.E. Suite, Apt. #, etc. # 5005	3. Mailing Address 800 Kay Rd. N.E. Suite, Apt. #, etc. # 5005
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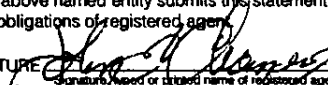
City & State Bradenton, FL	City & State Bradenton, FL
Zip 34212	Zip 34212
Country Maratee	Country Maratee

02062008 Chg-LLC CR2E083 (12/06)

4. FEI Number 26-7748353	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

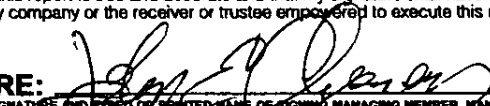
6. Name and Address of Current Registered Agent CHANEY, JOHN E 39 MICHIANA DRIVE TERRA CEIA, FL 34250	
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7. Name and Address of New Registered Agent Name Chaney, John E. Street Address (P.O. Box Number is Not Acceptable) 800 Kay Rd. N.E. #5005 City Bradenton FL Zip Code 34212	
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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 	DATE 2/7/08

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHANEY, JOHN E 800 KEY RD NE BRADENTON, FL 34212 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: 	DATE 2/8/08 94-749-6300