2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT (AR)**

Jan 31, 2005 8:00 am Secretary of State DOCUMENT # L03000057058 1. Entity Name 01-31-2005 90197 034 ****50.00 MAC NARY CONTRACTING L.L.C. Principal Place of Business Mailing Address % LAWRENCE MAC NARY JR. 1900 35TH ST NORTH ST. PETERSBURG FL 33713 % LAWRENCE MAC NARY JR. 1900 35TH ST NORTH ST. PETERSBURG FL 33713 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E083 (10/04) City & State City & State 4. FEI Number Applied For 72-169*0*039 Not Applicable Ζip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ADDRESS CHANGE MAC NARY, LAWRENCE JR. Street Address (P.O. Box Number is Not Acceptable) 6101 3RD AVE. SOUTH ST. PETERSBURG FL 33707 Zip Code 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 / FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2005 MANAGING MEMBERS/MANAGERS 9. ADDITIONS/CHANGES 10. **MGRM** TITLE TITLE ☐ Delete Change ☐ Addition MAC NARY, LAWRENCE NAME NAME STREET ADDRESS 6101 3RD AVE. SOUTH STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33707 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP TII! F Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THILE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify 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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

LAWRENCE F. MACNARY JR

FILED