

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000003296

1. Entity Name
SHY LO CONSTRUCTION SERVICES LLC



Principal Place of Business

**856 LOCKWOOD DRIVE
ORLANDO, FL 32833**

Mailing Address

**856 LOCKWOOD DRIVE
ORLANDO, FL 32833**

DO NOT WRITE IN THIS SPACE



04072008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
56-2425997

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MUSTOE, JODI K ESQ
COX & ROUSE, P.A.
240 LOOKOUT PLACE
MAITLAND, FL 32751**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE **04/14/2008**

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

04/24/08-80060-006 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
HALL, MARK L
856 LOCKWOOD DRIVE
ORLANDO, FL 32833**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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: Mark L Hall

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/16/2008 407-721-2743

Date

Daytime Phone #