


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000007163 1. Entity Name ON THE LEVEL CONSTRUCTION, LLC	
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Principal Place of Business 6503 THOROUGHbred LOOP ODESSA, FL 33556	Mailing Address 6503 THOROUGHbred LOOP ODESSA, FL 33556
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04232006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 41-2153772	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent DAVID R. CARTER PA 5308 SPRING HILL DRIVE SPRING HILL, FL 34606

**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

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SIVITZ, DAVID R 6503 THOROUGHbred LOOP ODESSA, FL 33556
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05/06/06-80135-018 50.00

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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:  **4-24-06 (352) 650-0700**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #