2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 16, 2008 08:00 Al Secretary of State DOCUMENT # L04000008994 BOB HOLLON CONSTRUCTION, LLC Principal Place of Business Mailing Address 2816 OVERLAKE AVENUE 2816 OVERLAKE AVENUE ORLANDO, FL 32806 ORLANDO, FL 32806 03072008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 40-2729144 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOLLON, BOB DO NOT WRITE 2816 OVERLAKE AVENUE ORLANDO, FL 32806 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, /11/08 SIGNATURE FILE NOWILL FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 ԱՌՈՐՈՐՈՐՈՐՈՐՈՎ MANAGING MEMBERS/MANAGERS 9. 04/29/08-80045-024 138.75 PST TITLE HOLLON, BOB NAME STREET ADDRESS 2816 OVERLAKE AVENUE C/TY-ST-ZIP ORLANDO, FL 32806 ТПІ Е NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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:

SIGNATURE AND TYPED OF PRINTED NAME OF BIGNING MAINGING MEMBER OR AUTHORIZED REPRESENTATIVE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4/11/08

U-7051 147

Daytime Phone #

FILED