


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 09, 2007 08:00 AM
Secretary of State

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| DOCUMENT # L04000009184 1. Entity Name PREMIER BUILDERS LLC |  |
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| Principal Place of Business 90 1ST STREET BIG PINE KEY, FL 33043 | Mailing Address 90 1ST STREET BIG PINE KEY, FL 33043 |
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| DO NOT WRITE IN THIS SPACE |
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01052007 No Chg-LLC

CR2E083 (11/05)

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| 4. FEI Number 20-0691237 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent STUTEVOSS, MICHAEL H 90 1ST STREET BIG PINE KEY, FL 33043 |
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small> |
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**Filing Fee is \$50.00
Due by May 1, 2007**

| 9. MANAGING MEMBERS/MANAGERS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR STUTEVOSS, MICHAEL H 90 1ST STREET BIG PINE KEY, FL 33043 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR GRAY, KIMBERLY 90 1ST STREET BIG PINE KEY, FL 33043 |
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| <p>U000000580128 01/10/07-80035-007 50.00</p> <p>DO NOT WRITE IN THIS SPACE</p> |
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| 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: <i>Michael H. Stutevoss</i> MICHAEL H. STUTEVOSS 1/5/07 305-872-3311 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE (Date) Daytime Phone #</small> |
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