


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 03, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000014013**

1. Entity Name  
**SUNCO CONSTRUCTION SERVICES, LLC**



Principal Place of Business      Mailing Address

**P.O BOX 31883**      **P.O BOX 31883**  
**PALM BEACH GARDENS, FL 33420 US**      **PALM BEACH GARDENS, FL 33420 US**

**DO NOT WRITE IN THIS SPACE**



01052006 No Chg-LLC      CR2E063 (11/05)

4. FEI Number      Applied For  
**20-0759778**      Not Applicable

5. Certificate of Status Desired       **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HOGARTH, BETH**  
**432 ANCHORAGE LANE**  
**NORTH PALM BEACH, FL 33408**

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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: *Beth Hogarth* Beth Hogarth, Manager      3/31/06  
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 HOGARTH, BETH P.O. BOX 31883 PALM BEACH GARDENS, FL 33420
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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: *Beth Hogarth* BETH HOGARTH Managing Member      3/31/06      561301-0193  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #