2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 13, 2006 8:00 am Secretary of State

DOCUMENT # L04000019181 1. Entity Name KINGFISHER CONSTRUCTION, LLC								6 90034 013 **	***50.00	
Principal Place 4116 W SEVI TAMPA, FL 3	ILLA ST	3	Mailing Address 4116 W SEVILLA ST TAMPA, FL 33629	116 W SEVILLA ST		20029438				
2. Principal Place of Business 4116 W Leona 5+			3. Mailing Address 4116 W Leona St			[[]				
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			03312006	Chg-LLC	CR2E083 (11/	05)	
City & State	- Pa	CI	City & State	FI		4. FEI Numbe			Applied For Not Applicable	
Zip 330	-29	Country H:1k base	L Zip 33629	Country	امیما		of Status Desired	□ \$5.00 Fee Rec	Additional	
	6. Name	and Address of Current F	Registered Agent			7. Name and	Address of New F			
BATES CUBISTOBUED				Nar	Name					
BATES, CHRISTOPHER 4116 W LEONA ST TAMPA, FL 33629				Stre	Street Address (P.O. Box Number is Not Acceptable)					
	2 00020									
				City	у		-	FL Zip	Code	
			the purpose of changing its re	egistered offi	ice or register	ed agent, or bot	th, in the State of FI	orida. I am familiar v	rith, and accept	
	ions of nigist	ered agent.	- 01	12	. L-s		4	117/06		
SIGNATURE .	Signature, typed	or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent	signature required	when reinstating)		DATE		
			1							
Fi Di	iling Fee i ue by May	is \$50.00 y 1, 2006				·		ke check payable a Department of S		
9.	ue by May	s \$50.00 y 1, 2006 MANAGING MEMBEI		10.		0		Department of S	State	
9. 111LE	MGRM	y 1, 2006 MANAGING MEMBEI	RS/MANAGERS	10. TITLE NAME		Rm Les, Chri	Florid	a Department of S	State	
9. 11TLE NAME STREET ADDRESS	MGRM BATES, C	MANAGING MEMBEI CHRIS EVA MOORE RD.		TITLE NAME STREET ADDR	RESS Ba	tes, chr.	ADDITIONS S Long 54	Z Department of S /CHANGES (Change)	State	
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I hereby certify that the information supplied with this filling 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Chris Bates SIGNATURE: Chris Dates
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE 4/7/06

813-434-6818

Dayume Phone #