2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # L04000020168

1. Entity Name

M. PÉRDUE CONSTRUCTION, LLC



FILED Aug 17, 2007 08:00 A Secretary of State

Principal Place of Business

4940 DONALSON RD PANAMA CITY, FL 32404 Mailing Address

4940 DONALSON RD PANAMA CITY, FL 32404



06112007 No Chg-LLC

CR2E083 (11/05)

| 4. | FEI Number | | | |
|----|------------|--|--|--|
| | 20-0877086 | | | |
| | | | | |

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

| 6. | Name | and Address of | Current Reg | gistered | d Agent |
|----|------|----------------|-------------|----------|---------|
| | | | | | |

PERDUE, MICHAEL 4940 DONALSON RD PANAMA CITY, FL 32404

DO NOT WRITE IN THIS SPACE

| | | 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 | | | | |
| Fil Due I | ling Fee is \$50.00 by September 14, 2007 | | | | | | |
| 9. | MANAGING MEMBERS/MANAGERS | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM PERDUE, MICHAEL 4940 DONALSON RD PANAMA CITY, FL 32404 | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | 000000772284 08/17/07-80007-005 50.00 | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | DO | NOT WRITE | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | IN | THIS SPACE | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | | |
| TITLE NAMÉ 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. | | | | | | | |