

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024595

Entity Name: LUCIDO MASONRY LLC

FILED  
Feb 15, 2006  
Secretary of State

**Current Principal Place of Business:**

860 US HIGHWAY #1  
SUITE 109  
N. PALM BEACH, FL 33408 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1607  
SAGAMORE BEACH, MA 02562 US

**New Mailing Address:**

FEI Number: 73-1705383

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEGALZOOM NEVADA, INC.  
44 W. FLAGLER ST.  
SUITE 675  
MIAMI, FL 33130 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LUCIDO, SHARON  
Address: 860 US HIGHWAY #1 SUITE 109  
City-St-Zip: N. PALM BEACH, FL 33408 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LUCIDO, SHARON  
Address: P.O. BOX 1607  
City-St-Zip: SAGAMORE BEACH, MA 02562 US

Title: MGRM ( ) Change (X) Addition  
Name: LUCIDO, JOSEPH A JR  
Address: P.O. BOX 1607  
City-St-Zip: SAGAMORE BEACH, MA 02562

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: SHARON LUCIDO

MGR

02/15/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date