

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90218 022 ****55.00

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04072005 Chg-LLC CR2E083 (10/03)

DOCUMENT # L04000028278 1. Entity Name HARDCORE CONCRETE LLC																			
Principal Place of Business 1528 DECATUR AVENUE HOLLY HILL, FL 32117			Mailing Address 1528 DECATUR AVENUE HOLLY HILL, FL 32117																
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		4. FEI Number Applied For <input checked="" type="checkbox"/> Not Applicable															
City & State		City & State																	
Zip	Country	Zip	Country																
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent WOMACK, CHARLES E 1528 DECATUR AVENUE HOLLY HILL, FL 32117															
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																			
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																			
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State		9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="width: 70%; padding: 2px;"> <input type="checkbox"/> Delete </td> </tr> <tr> <td style="padding: 2px;"> Charles E. Womack III 1528 Decatur Avenue Holly Hill FL 32117 </td> <td style="padding: 2px;"></td> </tr> <tr><td style="padding: 2px;"></td><td style="padding: 2px;"><input type="checkbox"/> Delete</td></tr> <tr><td style="padding: 2px;"></td><td style="padding: 2px;"><input type="checkbox"/> Delete</td></tr> <tr><td style="padding: 2px;"></td><td style="padding: 2px;"><input type="checkbox"/> Delete</td></tr> <tr><td style="padding: 2px;"></td><td style="padding: 2px;"><input type="checkbox"/> Delete</td></tr> <tr><td style="padding: 2px;"></td><td style="padding: 2px;"><input type="checkbox"/> Delete</td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	Charles E. Womack III 1528 Decatur Avenue Holly Hill FL 32117			<input type="checkbox"/> Delete		<input type="checkbox"/> Delete		<input type="checkbox"/> Delete		<input type="checkbox"/> Delete		<input type="checkbox"/> Delete
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Charles Womack</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		<u>4/8/05</u> <u>386 253 2186</u> <small>Date Daytime Phone #</small>																	