


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

9/14/2005 90072.006-\$55.00-\$55.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 OCT 14 AM 10:06

DOCUMENT # L04000048208 1. Entity Name SANDERS CONSTRUCTION SERVICES, LLC	
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Principal Place of Business 7651 NE 128TH LANE <i>change</i> BRONSON FL 32621	Mailing Address <i>same</i> P.O. BOX 574 BRONSON FL 32621
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2. Principal Place of Business 12391 NE 75 TH AVE Suite, Apt. #, etc.	3. Mailing Address P.O. Box 574 Suite, Apt. #, etc.
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City & State BRONSON FL Zip Country 32621 LEY	City & State Zip Country 32621 LEY
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4. FEI Number 20-0124931	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

SANDERS, KELLY
 7651 NE 128TH LANE
 BRONSON FL 32621

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 Kelly Sanders (NOTE: Registered Agent signature required when re-registering) DATE 9-7-05

FILE NOW!!! FEE IS \$50.00
 Make Check Payable to Florida Department of State
 Due By September 7, 2005

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SANDERS, KELLY 7651 NE 128TH LANE BRONSON FL 32621 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARY KATHERINE CARROLL SANDERS 7651 NE 128TH LANE BRONSON FL 32621 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Mailing address same) Principal place of Business is new 12391 NE 75th Ave Bronson FL 32621 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

REINSTATEMENT 2005

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: Kelly Sanders Date _____ Daytime Phone # _____

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