


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 22, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000051310	
1. Entity Name WHITTINGTON CONSTRUCTION OF ST. AUGUSTINE, LLC	
	
Principal Place of Business 521 OLD GOVERNOR'S WAY ST. AUGUSTINE, FL 32086	Mailing Address 521 OLD GOVERNOR'S WAY ST. AUGUSTINE, FL 32086



01162008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1349753	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

WHITTINGTON, HAROLD R
521 OLD GOVERNOR'S WAY
ST. AUGUSTINE, FL 32086

**DO NOT WRITE
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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WHITTINGTON, HAROLD R 521 OLD GOVERNOR'S WAY ST. AUGUSTINE, FL 32086
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IN THIS SPACE**

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.

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

1-16-08 904-825-7975

Date

Daytime Phone #