


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000068324 1. Entity Name LAGRASTA CONSTRUCTION, LLC			
Principal Place of Business 506 106TH AVENUE NORTH NAPLES, FL 34108		Mailing Address 506 106TH AVENUE NORTH NAPLES, FL 34108	
		01072007 No Chg-LLC CR2E083 (11/05)	
		4. FEI Number 20-1673824	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			
LA GRASTA, MARIA 506-106 AVENUE NORTH NAPLES, FL 34108			
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 re-registering) DATE _____			
Filing Fee is \$50.00 Due by May 1, 2007			
000000620917 02/09/07-80057-003 50.00			
9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LA GRASTA, DOMENICO 506 106TH AVENUE NORTH NAPLES, FL 34108		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LAGRASTA, MARIA 506 106TH AVENUE NORTH NAPLES, FL 34108		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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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: <u>Maria La Grasta</u> <u>MARIA LAGRASTA</u>		1-31-07 239-597-5850	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	