

# 2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000071871

FILED  
Aug 24, 2005  
Secretary of State

**Entity Name:** THOMAS T. WHITE, GENERAL CONTRACTOR, LLC

**Current Principal Place of Business:**

371374 KINGS FERRY RD  
HILLIARD, FL 32046

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1584  
HILLIARD, FL 32046

**New Mailing Address:**

**FEI Number:** 20-1703370

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHITE, THOMAS T  
241881 CR 121  
HILLIARD, FL 32046 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: WHITE, THOMAS T  
Address: 241881 CR 121  
City-St-Zip: HILLIARD, FL 32046

Title: MGRM ( ) Delete  
Name: JOHNSON, ROLLEN Y  
Address: 306 PEACH STREET  
City-St-Zip: FOLKSTON, GA 31537

Title: MGRM (X) Delete  
Name: REED, MICHAEL C  
Address: 810 PENN AVE.  
City-St-Zip: FOLKSTON, GA 31537

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THOMAS WHITE

MGRM

08/24/2005

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