

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT.

4/6/2005-90025-009-\$25.00-\$25.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAY 12 AM 10: 26

DOCUMENT # L04000072390																											
1. Entity Name CURT SKATES BUILDING CONTRACTOR & ROOFING LLC																											
Principal Place of Business 5331 JACKSON ROAD FT. MYERS, FL 33905		Mailing Address 5331 JACKSON ROAD FT. MYERS, FL 33905																									
2. Principal Place of Business		3. Mailing Address																									
Suite, Apt. #, etc.		Suite, Apt. #, etc.																									
City & State		City & State																									
Zip	Country	Zip	Country																								
4. Name and Address of Current Registered Agent SKATES, CURTIS W 5331 JACKSON ROAD FT. MYERS, FL 33905		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 _____ DATE _____ Signature: Name or printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when reinstating)																											
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State																									
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES																									
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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: 		4/2/06 239-850-1590																									
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone																									