

## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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**Entity Name:** S.A.M. CONSTRUCTION, L.L.C.

FILED  
Apr 25, 2005  
Secretary of State

**Current Principal Place of Business:**

New!!div data-bbox="111 111 388 128" data-label="Section-Header">

**New Principal Place of Business:**

8445 ROCKLAND DRIVE  
JACKSONVILLE, FL 32221

**Current Mailing Address:**

**New Mailing Address:**

P.O. BOX 551260  
JACKSONVILLE, FL 32255

FEI Number: 20-1820561      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:** \_\_\_\_\_ **Name and Address of New Registered Agent:** \_\_\_\_\_

SCHNEIDER, MICHAEL N  
5150 BELFORD ROAD, BUILDING 100  
JACKSONVILLE, FL 32256 US

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/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: MCPHERSON, SHAUN A  
Address: 8445 ROCKLAND DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221

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 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: SHAUN A MCPHERSON

MGRM

04/25/2005

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