

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078689

Entity Name: PENCE BROTHERS, LLC

FILED
Jun 28, 2005
Secretary of State

Current Principal Place of Business:

4301 SPANISH TRAIL DRIVE
PENSACOLA, FL 32504

New Principal Place of Business:

4301 SPANISH TRAIL
PENSACOLA, FL 32504

Current Mailing Address:

4301 SPANISH TRAIL DRIVE
PENSACOLA, FL 32504

New Mailing Address:

4301 SPANISH TRAIL
PENSACOLA, FL 32504

FEI Number: 37-1502772 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BAKER, STEVEN J
15 WEST LA RUA STREET
PENSACOLA, FL 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: MGR () Delete
Name: PENCE, CLYDE M
Address: 7801 PETERSON POINT ROAD
City-St-Zip: MILTON, FL 32583

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PENCE, CLYDE M
Address: 9023 WOODRUN LN.
City-St-Zip: PENSACOLA, FL 32514

Title: MBR () Change (X) Addition
Name: PENCE, THOMAS W
Address: 3028 GREYSTONE DR.
City-St-Zip: PACE, FL 32571

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: CLYDE M. PENCE M.D.

MGR

06/28/2005

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