

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000080229

FILED
Feb 21, 2005
Secretary of State

Entity Name: JONES CONCRETE & BLOCK WORKS LLC

Current Principal Place of Business:

541 HUB PRESLEY ROAD
LAUREL HILL, FL 32567

New Principal Place of Business:

Current Mailing Address:

541 HUB PRESLEY ROAD
LAUREL HILL, FL 32567

New Mailing Address:

FEI Number: 20-1837185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, BILLY R
541 HUB PRESLEY ROAD
LAUREL HILL, FL 32567 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/MEMBERS:

Title: MGM () Delete
Name: JONES, BILLY R
Address: 541 HUB PRESLEY ROAD
City-St-Zip: LAUREL HILL, FL 32567

Title: MGRM () Delete
Name: JONES, COY L
Address: 541 HUB PRESLEY RD
City-St-Zip: LAUREL HILL, FL 32567

Title: MGRM () Delete
Name: JONES, JEREMY A
Address: 541 HUB PRESLEY RD
City-St-Zip: LAUREL HILL, FL 32567

Title: MGRM () Delete
Name: PELHAM, EDDIE
Address: 13674 HWY 331
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: MGRM (X) Delete
Name: CHILDS, JEREMY G
Address: 75 THOMAS DR.
City-St-Zip: PAXTON, FL 32566

Title: MGRM (X) Delete
Name: JONES, JOSHUA L
Address: 13674 HWY 331
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JONES, BILLY R
Address: 541 HUB PRESLEY ROAD
City-St-Zip: LAUREL HILL, FL 32567

Title: MGRM (X) Change () Addition
Name: JONES, COY E
Address: 541 HUB PRESLEY RD
City-St-Zip: LAUREL HILL, FL 32567

Title: MGRM (X) Change () Addition
Name: HATTAWAY, WILLIAM A
Address: 104 BEN ASHLEY RD
City-St-Zip: LAUREL HILL, FL 32567

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: BILLY RAY JONES

MGR

02/21/2005

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