

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084396

FILED  
Apr 19, 2007  
Secretary of State

**Entity Name:** SAMUELSEN BUILDERS BROKERAGE, LLC

**Current Principal Place of Business:**

1620 PARILLA CIRCLE  
TRINITY, FL 34655

**New Principal Place of Business:**

1241 TOSCANO DR.  
TRINITY, FL 34655

**Current Mailing Address:**

P.O. BOX 1427  
ELFERS, FL 34680

**New Mailing Address:**

**FEI Number:** 20-1998737

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAMUELSEN, RICHARD M  
1525 RIDGE TOP DRIVE  
TARPON SPRINGS, FL 34689 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: SAMUELSEN, RICHARD M  
Address: 1525 RIDGE TOP DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: MGRM ( ) Delete  
Name: RYAN, MICHAEL F  
Address: 8126 TANTALLON WAY  
City-St-Zip: NEW PORT RICHEY, FL 346554512

**ADDITIONS/CHANGES:**

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 Chapter 119, 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: MICHAEL F. RYAN

VP

04/19/2007

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