

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092419

FILED
Jul 13, 2006
Secretary of State

Entity Name: SOUTHEASTERN CONSTRUCTION, LLC

Current Principal Place of Business:

2753 STATE ROAD 580
SUITE 201
CLEARWATER, FL 33761

New Principal Place of Business:

2753 STATE ROAD 580
SUITE 106
CLEARWATER, FL 33761

Current Mailing Address:

2753 STATE ROAD 580
SUITE 201
CLEARWATER, FL 33761

New Mailing Address:

2753 STATE ROAD 580
SUITE 106
CLEARWATER, FL 33761

FEI Number: 20-2038995 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

Name and Address of New Registered Agent:

STROHAUER, GARY N
1150 CLEVELAND STREET
SUITE 300
CLEARWATER, FL 33755 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/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR Delete
Name: CAUDLE, LARRY
Address: 2753 STATE ROAD 580, SUITE 201
City-St-Zip: CLEARWATER, FL 33761

Title: Change Addition
Name:
Address:
City-St-Zip:

Title: MGR Delete
Name: FLINN, JOHN
Address: 2753 STATE ROAD 580, SUITE 201
City-St-Zip: CLEARWATER, FL 33761

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: JOHN L FLINN

MGR

07/13/2006

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