

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000006206

FILED
Jan 18, 2006
Secretary of State

Entity Name: NATIONAL CONSTRUCTION SERVICE OF NORTH FLORIDA, LLC

Current Principal Place of Business:

1730 SHADOWOOD LANE, SUITE 302A
JACKSONVILLE, FL 32207

New Principal Place of Business:

4045 CONGA STREET
JACKSONVILLE, FL 32217

Current Mailing Address:

1730 SHADOWOOD LANE, SUITE 302A
JACKSONVILLE, FL 32207

New Mailing Address:

4045 CONGA STREET
JACKSONVILLE, FL 32217

FEI Number: 20-2084671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROTTI, DAVID A
1606 SHARONHILL DR
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

STANLEY, SHERMAN E
4045 CONGA STREET
JACKSONVILLE, FL 32217 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: SHERMAN E. STANLEY

01/18/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AMERSON, GLENN A
Address: 421 E. WOODHAVE DR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGR (X) Delete
Name: STANLEY, SHERMAN
Address: 4045 CONGA STREET
City-St-Zip: JACKSONVILLE, FL 32217

Title: MGR (X) Delete
Name: TROTTI, DAVID P
Address: 1606 SHARONHILL DR.
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STANLEY, SHERMAN E
Address: 4045 CONGA STREET
City-St-Zip: JACKSONVILLE, FL 32217

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: SHERMAN E. STANLEY

MGR

01/18/2006

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