

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000007287

1. Entity Name
FLORIDA RECONSTRUCTION SERVICES, LLC



Principal Place of Business
**1127 SOUTH PATRICK DRIVE
SUITE 15
SATELLITE BEACH, FL 32937**

Mailing Address
**1127 S. PATRICK DR.
SUITE 15
SATELLITE BEACH, FL 32937**



04272007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
84-1668144

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LEARY, MICHAEL W
1127 S. PATRICK DR.
SUITE 15
SATELLITE BEACH, FL 32937**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

4/30/07
DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
LEARY, MICHAEL W
1127 S. PATRICK DR. SUITE 15
SATELLITE BEACH, FL 32937**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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U000000759866
05/24/07-80060-009 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

4/30/07 321-778-7638
Date Daytime Phone #