

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000007660

**FILED**  
**Apr 07, 2010**  
**Secretary of State**

**Entity Name:** MCCANCE COMPLETE MASONRY LLC

**Current Principal Place of Business:**

4131 WHEELER DR  
MARIANNA, FL 32446

**New Principal Place of Business:**

**Current Mailing Address:**

4131 WHEELER DR  
MARIANNA, FL 32446

**New Mailing Address:**

**FEI Number:** 20-2263894

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCCANCE, JONATHAN KEITH  
4131 WHEELER DR  
MARIANNA, FL 32446 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:** MGR  
**Name:** MCCANCE, JONATHAN K  
**Address:** 4131 WHEELER DR  
**City-St-Zip:** MARIANNA, FL 32446

**Title:** MGRM  
**Name:** MCCANCE, JOSPEH W  
**Address:** 4125 WHEELER DR  
**City-St-Zip:** MARIANNA, FL 32446

I hereby 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:** JONATHAN K. MCCANCE

MGR

04/07/2010

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