


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 11, 2008 08:00 A**  
**Secretary of State**

|   |   |
|---|---|
| <b>DOCUMENT # L05000025585</b>          |  |
| 1. Entity Name<br>PBC CONSTRUCTION, LLC |   |

|   |   |
|---|---|
| Principal Place of Business<br>5437 SPRING HILL DRIVE<br>SPRING HILL, FL 34606 US | Mailing Address<br>5437 SPRING HILL DRIVE<br>SPRING HILL, FL 34606 US |
|---|---|

**DO NOT WRITE IN THIS SPACE**



01082008No Chg-LLC CR2E083 (12/07)

|   |                                       |
|---|---------------------------------------|
| 4. FEI Number<br>20-2521509                               | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$5.00</b> Additional Fee Required |

6. Name and Address of Current Registered Agent

CHRISTENSEN, PREBEN  
 5437 SPRING HILL DRIVE  
 SPRING HILL, FL 34606

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

| 9. MANAGING MEMBERS/MANAGERS                   |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGR<br>CHRISTENSEN, PREBEN<br>5437 SPRING HILL DRIVE<br>SPRING HILL, FL 34606 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

U00000780298  
 01/14/08-80016-017 138.75

**DO NOT WRITE 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:** Preben Christensen *Preben Christensen* 1-9-08 352- 279-6733  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #