

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031390

FILED  
Jan 16, 2008  
Secretary of State

Entity Name: JAMES LUCAS STUCCO & STONE, LLC

## Current Principal Place of Business:

3606-A PINELLAS DRIVE  
CHIPLEY, FL 32428 US

## New Principal Place of Business:

3740 VIKING DR  
CHIPLEY, FL 32428 US

## Current Mailing Address:

3606-A PINELLAS DRIVE  
CHIPLEY, FL 32428 US

## New Mailing Address:

3740 VIKING DR  
CHIPLEY, FL 32428 US

FEI Number: 20-2588671

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LUCAS, JAMES  
3606-A PINELLAS DRIVE  
CHIPLEY, FL 32428 US

## Name and Address of New Registered Agent:

LUCAS, JAMES  
3740 VIKING DR  
CHIPLEY, FL 32428 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: JAMES LUCAS

01/16/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: LUCAS, JAMES  
Address: 3606-A PINELLAS DRIVE  
City-St-Zip: CHIPLEY, FL 32428 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: LUCAS, JAMES  
Address: 3740 VIKING DR  
City-St-Zip: CHIPLEY, FL 32428 US

Title: MGRM ( ) Change (X) Addition  
Name: WIGGINS, RICHARD  
Address: 3606-A PINELLAS DR  
City-St-Zip: CHIPLEY, FL 32428

I hereby certify that the information supplied with this filing does not qualify 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: JAMES LUCAS

MGR

01/16/2008

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