2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT #L05000032744** 

1. Entity Name

POTTLE'S MASONRY & CONCRETE LLC



FILED Feb 12, 2007 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

941 ALLEN AVENUE ENGLEWOOD, FL 34223 US 941 ALLEN AVENUE

DO NOT WRITE IN THIS SPACE

ENGLEWOOD, FL 34223 US



01082007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2619721

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

POTTLE, VAUGHN M 941 ALLEN AVENUE ENGLEWOOD, FL 34223

## 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)	DATE
F	ling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR POTTLE, VAUGHN M 941 ALLEN AVENUE ENGLEWOOD, FL 34223		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000630697 02/20/07-80017-009 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	·		

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: // auch

NAME STREET ADDRESS CITY-ST-ZIP

EIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-10-67

941 475-620

Daytime Phone #