

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000043116

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** JAMES SOMMERS MASONRY, LLC

**Current Principal Place of Business:**

28802 102ND DRIVE EAST  
MYAKKA CITY, FL 34251 US

**New Principal Place of Business:**

1400 DEBRECEN ROAD  
SARASOTA, FL 34240 US

**Current Mailing Address:**

28802 102ND DRIVE EAST  
MYAKKA CITY, FL 34251 US

**New Mailing Address:**

1400 DEBRECEN ROAD  
SARASOTA, FL 34240 US

**FEI Number:** 33-1086048

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SOMMERS, JAMES  
28802 102ND DRIVE EAST  
MYAKKA CITY, FL 34251 US

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

SOMMERS, JAMES  
1400 DEBRECEN ROAD  
SARASOTA, FL 34240 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 SOMMERS

02/18/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** SOMMERS, JAMES  
**Address:** 1400 DEBRECEN ROAD  
**City-St-Zip:** SARASOTA, FL 34240 US

**Title:** MGRM  
**Name:** SOMMERS, KRISTY  
**Address:** 1400 DEBRECEN ROAD  
**City-St-Zip:** SARASOTA, FL 34240 US

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:** JAMES SOMMERS

MGRM

02/18/2011

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