

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000050080

Entity Name: ALL SEASONS CONSTRUCTION LLC

FILED
Mar 01, 2008
Secretary of State

Current Principal Place of Business:

SYED I NIAZI
1380 CARLYSLE PK DR
LAWRENCEVILLE, GA 30044

Current Mailing Address:

6161 BLUE ANGEL PKWY
PENSACOLA, FL 32526

New Principal Place of Business:

196 E NINE MILE RD
SUITE F
PENSACOLA, FL 32534 US

New Mailing Address:

196 E NINE MILE RD
SUITE F
PENSACOLA, FL 32534 US

FEI Number: 20-2711501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIAZI, SYED I
6161 BLUE ANGEL PKWY
PENSACOLA, FL 32526 US

Name and Address of New Registered Agent:

IKNER, CATHY P CEO
196 E NINE MILE RD
SUITE F
PENSACOLA, FL 325234 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: CATHY P IKNER

03/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: IKNER, THOMAS J
Address: 6161 BLUE ANGEL PKWY
City-St-Zip: PENSACOLA, FL 32526

Title: MGRM (X) Delete
Name: SYED, NIAZI I
Address: 6161 BLUE ANGEL PKWY
City-St-Zip: PENSACOLA, FL 32526

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: IKNER, THOMAS J PRES
Address: 196 E NINE MILE RD, SUITE F
City-St-Zip: PENSACOLA, FL 325234 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS J IKNER

PRES

03/01/2008

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