

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064742

FILED
Jul 05, 2006
Secretary of State

Entity Name: ACTION CONSTRUCTION GROUP, LLC

Current Principal Place of Business:

2641 KERSEY COURT
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

2641 KERSEY COURT
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-3809450 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CHAVES, ERIKA
2641 KERSEY COURT
JACKSONVILLE, FL 32216 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CHAVES, ERIKA
Address: 2641 KERSEY COURT
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM () Delete
Name: DOMINGO, LESLEY
Address: 2641 KERSEY COURT
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM () Delete
Name: FONTE, FERNANDO
Address: 10840 RUTHERFORD COURT
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ERIKA CHAVES

MGRM

07/05/2006

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