

FILED
Mar 07, 2008 8:00 am
Secretary of State

01-24-2008 90071 017 ***138.75

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000068544 1. Entity Name CORNERSTONE CONSTRUCTION OF FLORIDA, LLC			
Principal Place of Business 107 SOUTHLAKE CT NICEVILLE, FL 32578 US		Mailing Address 107 SOUTHLAKE CT NICEVILLE, FL 32578 US	
2. Principal Place of Business (No P.O. Box) 174 Watercolor Way Suite, Apt. #, etc. #241		3. Mailing Address 174 Watercolor Way Suite, Apt. #, etc. #241	
City & State Santa Rosa Bch. FL		City & State Santa Rosa Bch. FL	
Zip 32459		Zip 32459	
Country U.S.		Country U.S.	
4. FEI Number 51-0545719		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent O'HARA, TIMOTHY 107 SOUTHLAKE CT NICEVILLE, FL 32578		7. Name and Address of New Registered Agent Name O'hara Timothy Street Address (P.O. Box Number is Not Acceptable) 174 Watercolor Way City Santa FL Zip Code	
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 <u>Timothy O'hara</u> DATE <u>1-21-08</u>			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM O'HARA, TIMOTHY C 289 EDGEWOOD TERRACE SANTA ROSA BEACH, FL 32459	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM O'hara, Timothy C 174 Watercolor Way #241 Santa Rosa Bch. FL 32459
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROBERTS, RANDY 289 EDGEWOOD TERRACE SANTA ROSA BEACH, FL 32459	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Longinos, Lang Jr. 4111 Smith Rd Defunick Spgs. FL 32433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Edgar O. Lang MGRM 239 Bonita Dr. Defunick Spgs., FL 32433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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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: <u>Timothy G. O'hara</u>		Date <u>1-21-08</u> Daytime Phone # <u>770-530-8033</u>	

ATTACHMENT
30001491

Cornerstone Construction of FL, LLC
L05000068544

Timothy O'Hara – Manager

Longino Lara – Manager Member

Edgar Lara – Manager Member