2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L05000104047

1. Entity Name

FODÉN CONSTRUCTION LLC

Principal Place of Business

2016 TRADE CENTER WAY

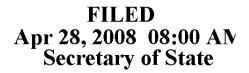
NAPLES, FL 34109

SHANER, BILL

Mailing Address

2016 TRADE CENTER WAY

NAPLES, FL 34109





DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

04222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-3663084

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

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DO NOT WRITE

NAPLES, FL 34109	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.

2016 TRADE CENTER WAY

Signature, typed or printed name of registered agent and title if applicable

(NOTE, Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000929875 05/21/08-80086-021 138.75

9.	MANAGING WEMBERS/MANAGERS		
TUTLE	MGR		
NAME	SHANER, BILL		
STREET ADDRESS	2016 TRADE CENTER WAY		
CITY-ST-ZIP	NAPLES, FL 34109		
TITLE	MGR		
NAME	FODEN, RICHARD		
STREET ADDRESS	2016 TRADE CENTER WAY		
CITY-SI-ZIP	NAPLES, FL 34109		
TITLE			
NAME			
STREET ADDRESS		DO NOT MIDITE	
CITY-SI-ZIP		DO NOT WRITE	
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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 pr trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED

OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #