2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# L05000104927

Entity Name: MASTERS CONSTRUCTION AND DEVELOPMENT, LLC

Current Principal Place of Business:

1304 FLETCHER AVE, W
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

1304 FLETCHER AVE, W
TAMPA, FL 33612

New Mailing Address:

FEI Number: 13-4313258 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JONAS, L. BRUCE
16017 N. FLORIDA AVENUE, SUITE 125
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

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:	JONAS, L. BRUCE
Address:	16017 N. FLORIDA AVENUE, SUITE 125
City-St-Zip:	LUTZ, FL 33549
Title:	MGRM ( ) Delete
Name:	ANGELL, ROCK C
Address:	8418 MAY STREET
City-St-Zip:	TAMPA, FL 33614
Title:	MGRM ( ) Delete
Name:	GRIFFIN, RICHARD G
Address:	16017 N. FLORIDA AVENUE, SUITE 125
City-St-Zip:	LUTZ, FL 33549

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	MGRM (X) Change ( ) Addition
Name:	GRIFFIN, RICHARD G
Address:	14923 DEVONSHIRE WOODS PL
City-St-Zip:	TAMPA, FL 33624

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: L. BRUCE JONAS MGRM 04/24/2007

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