

# 2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000107899

Entity Name: M B CONSTRUCTION, LLC

FILED  
Sep 19, 2008  
Secretary of State

## Current Principal Place of Business:

1504 E. OAKLEAF LANE  
KISSIMMEE, FL 34744

## New Principal Place of Business:

2475 MISSOURI  
SAINT CLOUD, FL 34769

## Current Mailing Address:

1504 E. OAKLEAF LANE  
KISSIMMEE, FL 34744

## New Mailing Address:

2475 MISSOURI AVE.  
SAINT CLOUD, FL 34769

FEI Number: 14-1941618

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCCOY, DONALD L  
1504 E. OAKLEAF LANE  
KISSIMMEE, FL 34744 US

## Name and Address of New Registered Agent:

MCCOY, DONALD L  
2475 MISSOURI AVE.  
SAINT CLOUD, FL 34769 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: DONALD L. MCCOY

09/19/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: MCCOY, DONALD L  
Address: 1504 E. OAKLEAF LANE  
City-St-Zip: KISSIMMEE, FL 34744

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

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

Title: MGR ( ) Change (X) Addition  
Name: LAMONTAGNE, THEODORE J III  
Address: 3548 PACKARD AVE.  
City-St-Zip: SAINT CLOUD, FL 34772

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: DONALD L MCCOY

MGR

09/19/2008

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