
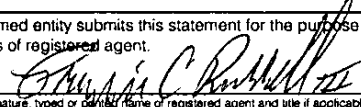
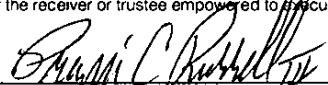


FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90046 036 ***125.00

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

60040789

DOCUMENT # L05000115697			
1. Entity Name BROOKSVILLE CIVIL SITE SERVICES, LLC			
Principal Place of Business 1790 EAST JEFFERSON STREET BROOKSVILLE, FL 34601		Mailing Address 1790 EAST JEFFERSON STREET BROOKSVILLE, FL 34601	
2. Principal Place of Business 808 SARDIS ST		3. Mailing Address 808 SARDIS ST	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State BROOKSVILLE FL		City & State BROOKSVILLE FL	
Zip 34601	Country US	Zip 34601	Country US
6. Name and Address of Current Registered Agent RUSSELL, PREZZIE C III 1790 EAST JEFFERSON STREET BROOKSVILLE, FL 34601		7. Name and Address of New Registered Agent Name RUSSELL, PREZZIE C III Street Address (P.O. Box Number is Not Acceptable) 808 SARDIS ST City BROOKSVILLE FL Zip Code 34601	
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  DATE 23 MAR 06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RUSSELL, PREZZIE C III 1790 EAST JEFFERSON STREET BROOKSVILLE, FL 34601 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RUSSELL, PREZZIE C III 808 SARDIS ST BROOKSVILLE FL 34601 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: 		Date 23 MAR 06 352/799-1485	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>	



ATTACHMENT
20020789

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 20, 2006

BROOKSVILLE CIVIL SITE SERVICES, LLC
1790 EAST JEFFERSON STREET
BROOKSVILLE, FL 34601

SUBJECT: ~~BROOKSVILLE CIVIL SITE SERVICES, LLC~~
Ref. Number: L05000115697

Upon receipt of your letter and/or check(s) totaling \$125.00, no document was found. Please send your document with any fees due to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock
Senior Section Administrator

Letter Number: 806A00018815