

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Mar 08, 2007  
Secretary of State**

DOCUMENT# L06000000875

Entity Name: HALFACRE-MATHEWS CONSTRUCTION, LLC

**Current Principal Place of Business:**

1604 N. MARION ST.  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

1604 N. MARION ST.  
TAMPA, FL 33602

**New Mailing Address:**

FEI Number: 20-4042865      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

OELLERICH, DAVID E  
1604 N. MARION ST.  
TAMPA, FL 33602    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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: OELLERICH, DAVID E  
Address: 448 LUCERNE AVE  
City-St-Zip: TAMPA, FL 33606

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID E. OELLERICH      MGRM      03/08/2007

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