2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

CLTY-ST-ZIP

FILED **DOCUMENT # L06000016953** 08 JUL -3 AM 10: 11 DANLEY & SONS CONSTRUCTION LLC SECRETARY UP STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address P.O. BOX 111 16938 N.W. 14 ST BLOUNTSTOWN, FL 32424 ALTHA, FL 32421 01042008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 06-1769459 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DANLEY, PAM DO NOT WRITE 20214 NW OAK AVENUE BLOUNTSTOWN, FL 32424 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. SIGNATURE. 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 MANAGING MEMBERS/MANAGERS 9. MGR TITLE DANLEY, CHARLES R NAME STREET ADDRESS 16938 N.W. 14 ST U7/08/08-01017--008 **138.75 BLOUNTSTOWN, FL 32424 CITY-ST-ZIP TITTE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREF,# ADDRESS CITY-ST-ZIP TITLE . NAME STREET ADDRESS

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.

MENDER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone 6