

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000022329

FILED
Feb 27, 2008
Secretary of State

Entity Name: LEAP OF FAITH CONSTRUCTION, LLC

Current Principal Place of Business:

307 LAKE PLACE
PANAMA CITY BEACH, FL 32413 US

New Principal Place of Business:

Current Mailing Address:

307 LAKE PLACE
PANAMA CITY BEACH, FL 32413 US

New Mailing Address:

FEI Number: 02-0770015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTON, STEVEN W
307 LAKE PLACE
PANAMA CITY BEACH, FL 32413 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: BARTON, STEVEN W
Address: 307 LAKE PLACE
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

Title: MGRM () Delete
Name: BRUBAKER, JOSIAH ERIC
Address: 307 LAKE PLACE
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

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

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: BRUBAKER, JOSIAH E
Address: 307 LAKE PLACE
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

Title: MGRM () Change (X) Addition
Name: BASS, PATRICK M
Address: 307 LAKE PLACE
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

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: STEVEN W. BARTON

MGRM

02/27/2008

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