

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000065032

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** EUCHEEANNA GENERAL CONTRACTING LLC

**Current Principal Place of Business:**

6979 HWY 183 SOUTH  
PONCE DE LEON, FL 32455

**New Principal Place of Business:**

6979 HWY 183 SOUTH  
PONCE DE LEON, FL 32455 2

**Current Mailing Address:**

6979 HWY 183 SOUTH  
PONCE DE LEON, FL 32455

**New Mailing Address:**

6979 HWY 183 SOUTH  
PONCE DE LEON, FL 32455 2

**FEI Number:** 02-0780506

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HERNANDEZ, CARLOS  
6979 HWY 183 SOUTH  
PONCE DE LEON, FL 32455 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  
Name: HERNANDEZ, SHARI  
Address: 6979 HWY 183 SOUTH  
City-St-Zip: PONCE DE LEON, FL 32455 2

I hereby 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: CARLOS HERNANDEZ

RA

04/21/2011

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