

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000002856

Entity Name: WALRAVEN MASONRY LLC

FILED
Apr 15, 2008
Secretary of State

Current Principal Place of Business:

1517 VIA DE LUNA DRIVE
PENSACOLA, FL 32561

New Principal Place of Business:

3645 MULDOON ROAD
PENSACOLA, FL 32526

Current Mailing Address:

1517 VIA DE LUNA DRIVE
PENSACOLA, FL 32561

New Mailing Address:

3645 MULDOON ROAD
PENSACOLA, FL 32526

FEI Number: 51-0597704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALRAVEN, NICHOLAS
1517 VIA DE LUNA DRIVE
PENSACOLA, FL 32561 US

Name and Address of New Registered Agent:

WALRAVEN, VALERIE
3645 MULDOON ROAD
PENSACOLA, FL 32526 US

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: VALERIE WALRAVEN

04/15/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WALRAVEN, NICHOLAS
Address: 1517 VIA DE LUNA DRIVE
City-St-Zip: PENSACOLA, FL 32561

Title: MGR () Delete
Name: WALRAVEN, VALERIE
Address: 1517 VIA DE LUNA DRIVE
City-St-Zip: PENSACOLA, FL 32561

Title: MGR (X) Delete
Name: CRAIG, MARY
Address: 3649 MULDON ROAD
City-St-Zip: PENSACOLA, FL 32526

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WALRAVEN, VALERIE
Address: 3645 MULDOON ROAD
City-St-Zip: PENSACOLA, FL 32526

Title: MGR (X) Change () Addition
Name: CRAIG, MARY
Address: 3649 MULDOON ROAD
City-St-Zip: PENSACOLA, FL 32526

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

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: VALERIE WALRAVEN

MRG

04/15/2008

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