

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000014435

FILED
Jun 12, 2008
Secretary of State

Entity Name: FAMILY CONSTRUCTION HOTEL RENOVATIONS, LLC

Current Principal Place of Business:

25614 NARBONNE STREET
LOMITA, CA 90717

New Principal Place of Business:

Current Mailing Address:

25614 NARBONNE STREET
LOMITA, CA 90717

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RODRIGUES & ASSOCIATES, CPAS
101 N MISSOURI AVE
2
CLEARWATER, FL 33755 US

Name and Address of New Registered Agent:

JONES, HAROLD PRES.
1465 FORT HARRISON AVE
204
CLEARWATER, FL 33755 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: HAROLD JONES

06/12/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JONES, HAROLD
Address: 25614 NARBONNE STREET
City-St-Zip: LOMITA, CA 90717

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

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

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

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: JONES, HAROLD
Address: 25614 NARBONNE STREET
City-St-Zip: LOMITA, CA 90717

Title: VP () Change (X) Addition
Name: BUCKHALTER, BRYAN
Address: 25614 NARBONNE AVE
City-St-Zip: LOMITA, CA 90717 US

Title: SEC () Change (X) Addition
Name: LYLE, CHRIS
Address: 25614 NARBONNE AVE
City-St-Zip: LOMITA, CA 90717 US

Title: MGRM () Change (X) Addition
Name: CHALLENGER, DONALD
Address: 25614 NARBONNE AVE.
City-St-Zip: LOMITA, CA 90717 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: HAROLD JONES

PRES

06/12/2008

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