

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008 4/1**

FILED
Jul 07, 2008 8:00 am
Secretary of State

04-14-2008 90227 044 ***138.75

DOCUMENT # L07000015893 1. Entity Name PARRISH MASONRY LLC.																																																																																									
Principal Place of Business 3014 RIVER ROAD VERNON FL 32462			Mailing Address 3014 RIVER ROAD VERNON FL 32462																																																																																						
2. Principal Place of Business - No P.O. Box 3014 River Rd Suite, Apt. #, etc.			3. Mailing Address 3014 River Rd Suite, Apt. #, etc.																																																																																						
City & State Vernon, FL		City & State Vernon, FL		4. FEE ☒ Applied For ☒ No: Applicable																																																																																					
Zip: 32462 Country: USA		Zip: 32462 Country: USA		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required																																																																																					
6. Name and Address of Current Registered Agent PARRISH, ANTHONY G 3014 RIVER ROAD VERNON FL 32462				7. Name and Address of New Registered Agent Name: _____ Street Address (P.O. Box Number is Not Acceptable): _____ City: _____ State: FL Zip Code: _____																																																																																					
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: <u><i>Anthony G. Parrish</i></u>				4-1-08																																																																																					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008, Fee Will Be \$538.75 Make Check Payable to Florida Department of State																																																																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left;">9. MANAGING MEMBERS/MANAGERS</th> <th colspan="3" style="text-align: left;">10. ADDITIONS/CHANGES</th> </tr> </thead> <tbody> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%;">☐ Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>Parrish masonry</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>anthony parrish</td> <td></td> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td></td> <td>3014 River Rd</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Vernon FL 32462</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS	Parrish masonry		STREET ADDRESS			CITY- ST- ZIP	anthony parrish		CITY- ST- ZIP				3014 River Rd						Vernon FL 32462																																																				
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 628, Florida Statutes.																																																																																									
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