

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

08 MAR 12 PM 1:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03112008 Chg-LLC CR2E083 (12/06)

DOCUMENT # L07000031479

1. Entity Name
E & J PATTERSON CONSTRUCTION LLC



Principal Place of Business
**2328 HOLTON ST
TALLAHASSEE, FL 32317**

Mailing Address
**346 SEMINOLE CIR
HAVANA, FL 32333**

2. Principal Place of Business - No P.O. Box #

2328 HOLTON ST

Suite, Apt. #, etc.

3. Mailing Address

346 SEMINOLE CIRCLE

Suite, Apt. #, etc.

City & State

TALLAHASSEE, FL

City & State

HAVANA, FL

4. FEI Number

30-0411580

Applied For

Not Applicable

Zip

32310

Country

US

Zip

32333

Country

US

5. Certificate of Status Desired



**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PATTERSON, EDDIE L JR
246 SEMINOLE CIR
HAVANA, FL 32333**

7. Name and Address of New Registered Agent

Name **JILL D. WASHINGTON**
Street Address (P.O. Box Number is Not Acceptable)
346 SEMINOLE CIRCLE

City **HAVANA**

FL

Zip Code **32333**

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

Jill D. Washington

(NOTE: Registered Agent signature required when renewing)

3/12/08

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete
NAME **PATTERSON, JILL**
STREET ADDRESS **346 SEMINOLE CIR**
CITY-ST-ZIP **HAVANA, FL 32333**

TITLE **MGRM** ☒ Delete
NAME **PATTERSON, EDDIE JR**
STREET ADDRESS **346 SEMINOLE CIR**
CITY-ST-ZIP **HAVANA, FL 32333**

TITLE **MGRM** ☐ Delete
NAME **DICKEY, CARLOS**
STREET ADDRESS **346 SEMINOLE CIR**
CITY-ST-ZIP **HAVANA, FL 32333**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGRM** ☒ Change ☐ Addition
NAME **WASHINGTON, JILL**
STREET ADDRESS **346 SEMINOLE CIRCLE**
CITY-ST-ZIP **HAVANA, FL 32333**

TITLE ☐ Change ☐ Addition
NAME **300121200253**
STREET ADDRESS **03/25/08--01024--017**
CITY-ST-ZIP ****138.75**

TITLE **MGRM** ☒ Change ☐ Addition
NAME **DICKEY, CARLOS**
STREET ADDRESS **1112 SOUTH MAGNOLIA ST**
CITY-ST-ZIP **TALLAHASSEE, FL 32301**

TITLE **MGRM** ☐ Change ☒ Addition
NAME **DICKEY, CHRISTOPHER**
STREET ADDRESS **1112 SOUTH MAGNOLIA ST**
CITY-ST-ZIP **TALLAHASSEE, FL 32301**

TITLE **MGRM** ☐ Change ☒ Addition
NAME **DICKEY, COURTNEY**
STREET ADDRESS **346 SEMINOLE CIRCLE**
CITY-ST-ZIP **HAVANA, FL 32333**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 608, Florida Statutes.

SIGNATURE:

Jill D. Washington

3/12/08

850-251-2609

DATE

Daytime Phone #