

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000035084

FILED
Mar 31, 2009
Secretary of State

Entity Name: BEAUTIFUL CUSTOM HOMES, LLC

Current Principal Place of Business:

14047 DUVAL ROAD
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

14047 DUVAL ROAD
JACKSONVILLE, FL 32218

New Mailing Address:

P.O. BOX 3523
JACKSONVILLE, FL 32206

FEI Number: 20-3169609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCSTINE, CHARLENE M
14047 DUVAL ROAD
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

GRIFFIN, CHARLENE M
1631 SILVER STREET
JACKSONVILLE, FL 32206 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: CHARLENE M. GRIFFIN

03/31/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCSTINE, CHARLENE M
Address: 14047 DUVAL ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: MGRM () Delete
Name: MCSTINE, LEO R
Address: 14047 DUVAL ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: MGRM () Delete
Name: MCSTINE, EDWARD R
Address: 14047 DUVAL ROAD
City-St-Zip: JACKSONVILLE, FL 32218 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GRIFFIN, CHARLENE M
Address: 14047 DUVAL ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: MGRM (X) Change () Addition
Name: FOX, JAMES G
Address: 365 SPUR HIGHWAY
City-St-Zip: ST MARYS, GA 31558 US

Title: MGRM (X) Change () Addition
Name: SCHWARTZ, RYAN F
Address: 403 MARGERET STREET
City-St-Zip: ST MARYS, GA 31558 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: CHARLENE M. GRIFFIN

MGR

03/31/2009

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