

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000045497

FILED
Mar 29, 2008
Secretary of State

Entity Name: WHYTE'S CONSTRUCTION GROUP, LLC

Current Principal Place of Business:

104 NEWTON RD
HOLLYWOOD, FL 33023

New Principal Place of Business:

Current Mailing Address:

104 NEWTON RD
HOLLYWOOD, FL 33023

New Mailing Address:

FEI Number: 20-8993976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHYTE, MAGGALEE
104 NEWTON RD
HOLLYWOOD, FL 33023 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WHYTE, GREGORY P
Address: 104 NEWTON RD
City-St-Zip: HOLLYWOOD, FL 33023

Title: MGRM (X) Delete
Name: CAMPBELL, LEWIN
Address: 130 NW 85 STREET
City-St-Zip: MIAMI, FL 33150

Title: MGRM () Delete
Name: DAWKINS, KESHA
Address: 3617 SW 69 AV
City-St-Zip: MIRAMAR, FL 33023

Title: MGRM () Delete
Name: ELLISON, ALRIC
Address: 6920 SW 26 CT.
City-St-Zip: MIRAMAR, FL 33023

ADDITIONS/CHANGES:

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

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

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

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: GREGORY P. WHYTE

MGR

03/29/2008

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