2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 23, 2008
Secretary of State

DOCUMENT# L07000065202

Entity Name: R J C CONSTRUCTION L.L.C.

Current Principal Place of Business:

21 TWIN RIVER DR
ORMOND BEACH, FL 32174

New Principal Place of Business:

3212 NW 45TH PLACE
CAPE CORAL, FL 33993

Current Mailing Address:

21 TWIN RIVER DR
ORMOND BEACH, FL 32174

New Mailing Address:

3212 NW 45TH PLACE
CAPE CORAL, FL 33993

FEI Number: 26-1115031 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BYRON, ROBERT
21 TWIN RIVER DR
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

BYRON, ROBERT
3212 NW 45TH PLACE
CAPE CORAL, FL 33993 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: ROBERT BYRON 03/23/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: BYRON, ROBERT
Address: 21 TWIN RIVER DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM ( ) Delete
Name: BYRON, JERILYN
Address: 21 TWIN RIVER DR
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: BYRON, ROBERT
Address: 3212 NW 45TH PLACE
City-St-Zip: CAPE CORAL, FL 33993

Title: MGRM (X) Change ( ) Addition
Name: BYRON, JERILYN
Address: 3212 NW 45TH PLACE
City-St-Zip: CAPE CORAL, FL 33993

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: ROBERT BYRON MGR 03/23/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date