

2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L07000079619

1. Entity Name
DEAL CONSTRUCTION, LLC



Principal Place of Business
80 MONK ROAD
FROSTPROOF, FL 33843 US

Mailing Address
80 MONK ROAD
FROSTPROOF, FL 33843 US

2. Principal Place of Business - No P.O. Box #
18544 E Vassar Dr

3. Mailing Address
Suite, Apt. #, etc.

City & State
Aurora, CO

Zip -- Country
80013 US

4. FEI Number
26-01647262

Applied For
Not Applicable

5. Certificate of Status Desired
□ - \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

THE LAW OFFICES OF NICK SPRADLIN, PLLC
4001 WEST HENRY AVENUE
SUITE 306
TAMPA, FL 33614

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reassigning)

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

10. ADDITIONS/CHANGES

TITLE MGRM
NAME DEAL, BRAD N
STREET ADDRESS 80 MONK ROAD
CITY-ST-ZIP FROSTPROOF, FL 33843

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

18544 E Vassar Dr
Aurora, CO 80013

TITLE MGRM
NAME DEAL, DENNIS M
STREET ADDRESS 80 MONK ROAD
CITY-ST-ZIP FROSTPROOF, FL 33843

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE MGRM
NAME GAINER, SAMUEL J
STREET ADDRESS 80 MONK ROAD
CITY-ST-ZIP FROSTPROOF, FL 33843

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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: *Brad Deal* 4-29-08 303-731-7722
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Date

Daytime Phone #