

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000068592

FILED  
May 01, 2010  
Secretary of State

**Entity Name:** PHOENIX CONSTRUCTION & DEVELOPMENT GROUP, LLC

**Current Principal Place of Business:**

3143 NE 14TH STREET  
SUITE 101  
OCALA, FL 34470

**New Principal Place of Business:**

**Current Mailing Address:**

3143 NE 14TH STREET  
SUITE 101  
OCALA, FL 34470

**New Mailing Address:**

**FEI Number:** 32-0255708      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

CLAUSS, EMERSON J III  
3143 NE 14TH STREET  
SUITE 101  
OCALA, FL 34471 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CLAUSS, EMERSON J III  
Address: 3365 SE 1ST AVENUE  
City-St-Zip: Ocala, FL 34471

Title: MGRM  
Name: WILSON, EDWARD  
Address: 6960 SW 155 STREET  
City-St-Zip: DUNNELLON, FL 34432

Title: MGRM  
Name: CRAFT, DAVID L  
Address: 107 FISHER RUN TERRACE  
City-St-Zip: OCKLAWHA, FL 32179

Title: MGRM  
Name: KLUGGER, JOSHUA  
Address: 3251 SE 31ST STREET  
City-St-Zip: Ocala, FL 34471

Title: MGRM  
Name: CARLSON, TERRY L  
Address: 2715 SE 23 AVENUE  
City-St-Zip: Ocala, FL 34471

I hereby 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: TERRY CARLSON

MGRM

05/01/2010

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