2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000081415

Entity Name: CENTERPOINT CONSTRUCTION, LLC

FILED Feb 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10297 185TH STREET SOUTH BOCA RATON, FL 33498

Current Mailing Address: New Mailing Address:

 10297 185TH STREET SOUTH
 5555 NOB HILL ROAD

 BOCA RATON, FL 33498
 SUNRISE, FL 33351

FEI Number: 26-3236173 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HOADLEY, SHARLEEN M HOADLEY, SHARLEEN M MGRM 10297 185TH STREET SOUTH 5555 NOB HILL ROAD SUNRISE, FL 33351 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: SHARLEEN M HOADLEY 02/17/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

 Title:
 MGRM () Delete

 Name:
 HOADLEY, SHARLEEN M

 Address:
 10297 185TH STREET SOUTH

 City-St-Zip:
 BOCA RATON, FL 33498

 Title:
 MGRM () Delete

 Name:
 LANCASTER, RICHARD A

 Address:
 516 GREENWAY DRIVE

 City-St-Zip:
 NORTH PALM BEACH, FL 33408

 Title:
 MGRM () Delete

 Name:
 CHAMBERLIN, JAMES M

 Address:
 8511 WENDY LANE N

 City-St-Zip:
 WEST PALM BECH, FL 33411

 Title:
 MGRM () Delete

 Name:
 WILKINSON, CHAD

 Address:
 3301 S FLAGLER DRIVE

 City-St-Zip:
 WEST PALM BEACH, FL 33405

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HOADLEY, SHARLEEN M
Address: 5555 NOB HILL ROAD
City-St-Zip: SUNRISE, FL 33351 US

Title: MGRM (X) Change () Addition Name: LANCASTER, RICHARD A

Address: 516 GREENWAY DRIVE

City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: MGRM (X) Change () Addition Name: CHAMBERLIN, JAMES M

Address: 8511 WENDY LANE N

City-St-Zip: WEST PALM BECH, FL 33411 US

Title: MGRM (X) Change () Addition Name: WILKINSON, CHAD

Address: 3301 S FLAGLER DRIVE

City-St-Zip: WEST PALM BEACH, FL 33405 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: SHARLEEN M HOADLEY MGRM 02/17/2009