


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 22, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M01000000460</b> 1. Entity Name FLOURNOY CONSTRUCTION COMPANY, L.L.C.	
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Principal Place of Business 900 BROOKSTONE CENTRE PKWY. COLUMBUS, GA 31904	Mailing Address 900 BROOKSTONE CENTRE PKWY. COLUMBUS, GA 31904
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**DO NOT WRITE IN THIS SPACE**



04132005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 58-1133017	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PALM ISLAND ROAD PLANTATION, FL 33324
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**DO NOT WRITE  
IN THIS SPACE**

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 reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2005**

U000000324498  
04/22/05-80096-019 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLOURNOY, JOHN F RT 1, FULTON ROAD UPATOI, GA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KINNEY, THOMAS D P O BOX 6566 COLUMBUS, GA 31917
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, RANDALL W 413 BARSHALL DRIVE COLUMBUS, GA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OSBORNE, RANDY RT 2 BOX 627-C SMITHS, AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HARRELL, THOMAS E 8802 RIVER ROAD COLUMBUS, GA 31904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V EARLEY, KEVIN F 4441 CONISBAUGH WAY COLUMBUS, GA 31907

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** Jeffrey W. Johnson JEFFREY W. JOHNSON 4/13/05 (706) 324-4000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #