## 2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # M01000000460

FLOURNOY CONSTRUCTION COMPANY, L.L.C.



Principal Place of Business

COLUMBUS, GA 31904

900 BROOKSTONE CENTRE PKWY.

Mailing Address

900 BROOKSTONE CENTRE PKWY.

COLUMBUS, GA 31904

**FILED** Mar 21, 2008 08:00 A Secretary of State



03032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 58-1133017

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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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

## FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

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-SJ-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	COLUMBUS, GA 31907
11. I bereby certify that the information supplied with this filing does not qualify for the av-	

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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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/18/08

706-243-9423