


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M04000002021 1. Entity Name SUMMIT CONSTRUCTION, LLC	
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FILED
Aug 27, 2008 08:00 AM
Secretary of State

Principal Place of Business 105 TALLAPOOSA STREET SUITE 300 MONTGOMERY, AL 36104	Mailing Address 105 TALLAPOOSA STREET SUITE 300 MONTGOMERY, AL 36104
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DO NOT WRITE IN THIS SPACE

07092008 No Chg-LLC		CR2E083 (12/07)	
4. FEI Number 72-1374038		Applied For	
		Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent RIVARD, BO ESQ 420 WEST BEACH DRIVE PANAMA CITY, FL 32401	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008	In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.	U00000958525 08/27/08-80006-010 138.75
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9. MANAGING MEMBERS/MANAGERS	
TITLE	MGRM
NAME	HUGHES, W. DANIEL
STREET ADDRESS	105 TALLAPOOSA STREET, STE. 300
CITY-ST-ZIP	MONTGOMERY, AL 36104
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
 IN THIS SPACE

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:  **Scott Crossfield CEO** 8-25-08 334-654-4458

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #