


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2007 8:00 am
Secretary of State

01-12-2007 90027 027 ***155.00

DOCUMENT # M04000002723					
1. Entity Name MULLIGAN CONSTRUCTORS, LLC					
Principal Place of Business 4525 VINELAND RD. SUITE 207 ORLANDO, FL 32811			Mailing Address 4525 VINELAND RD. SUITE 207 ORLANDO, FL 32811		
2. Principal Place of Business - No P.O. Box # 4525 VINELAND RD.		3. Mailing Address 4525 VINELAND RD.			
Suite, Apt. #, etc. SUITE 207		Suite, Apt. #, etc. SUITE 207			
City & State ORLANDO		City & State ORLANDO		4. FEI Number 11-3663725	
Zip 32811		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MULLIGAN, JENNIFER 13350 WEST COLONIAL DRIVE SUITE 320 WINTER GARDEN, FL 34787			7. Name and Address of New Registered Agent Name JENNIFER W. MULLIGAN Street Address (P.O. Box Number is Not Acceptable) 4525 VINELAND RD. SUITE 207 City ORLANDO FL Zip Code 32811		
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 <u>Jennifer W. Mulligan</u> JENNIFER W. MULLIGAN SECTREAS. 1/9/07 <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE)</small>					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MULLIGAN, RICHARD B 13350 WEST COLONIAL DRIVE, SUITE 320 ORLANDO, FL 34787	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MULLIGAN, JASON E 13350 WEST COLONIAL DRIVE SUITE 320 WINTER GARDEN, FL 34787	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECR MULLIGAN, JENNIFER W 13350 WEST COLONIAL DRIVE SUITE 320 WINTER GARDEN, FL 34787	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete			
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: <u>Richard B. Mulligan</u> RICHARD B. MULLIGAN, CEO 1/9/07 407 654 6523 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					