I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and

that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HERBERT EUGENE WILLIAMS

OWNER

01/08/2014

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:

Electronic Signature of Registered Agent

Entity Name: MAIN STREET CONSTRUCTION SERVICES LLC

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	WILLIAMS, GENE	Name	WILLIAMS, RHONDA
Address	1700 E. 12TH STREET	Address	1700 E. 12TH STREET
City-State-Zip:	LYNN HAVEN FL 32444	City-State-Zip:	LYNN HAVEN FL 32444

1700 E. 12TH STREET LYNN HAVEN. FL 32444

Current Mailing Address:

1700 E. 12TH STREET LYNN HAVEN. FL 32444

DOCUMENT# L0600008631

Current Principal Place of Business:

FEI Number: 20-4129847

Name and Address of Current Registered Agent:

WILLIAMS, GENE 1700 E. 12TH STREET LYNN HAVEN, FL 32444 US

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 08, 2014 Secretary of State CC3438145413

Date

Certificate of Status Desired: No

Date

Electronic Signature of Signing Authorized Person(s) Detail