

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000113521

FILED
Feb 27, 2008
Secretary of State

Entity Name: 3RD CONSTRUCTION CONSULTANTS LLC

Current Principal Place of Business:

238 W. WELBOURNE, STE. 11
WINTER PARK, FL 32789

New Principal Place of Business:

1070 OAKS BLVD
WINTER PARK, FL 32789

Current Mailing Address:

238 W. WELBOURNE, STE. 11
WINTER PARK, FL 32789

New Mailing Address:

PO BOX 541521
ORLANDO, FL 32854

FEI Number: 54-2186871

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAHAM, BENJAMIN J
238 W. WELBOURNE, STE. 11
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

ABRAHAM, BENJAMIN J
1070 OAKS BLVD
WINTER PARK, FL 32789 US

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: BENJAMIN ABRAHAM

02/27/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ABRAHAM, BENJAMIN J
Address: 238 W. WELBOURNE STE. 11
City-St-Zip: WINTER PARK, FL 32789

Title: MGR () Delete
Name: VEST, GERALD
Address: P.O. BOX 541521
City-St-Zip: ORLANDO, FL 32854

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ABRAHAM, BENJAMIN J
Address: 1070 OAKS BLVD
City-St-Zip: WINTER PARK, FL 32789

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: BENJAMIN ABRAHAM

MM

02/27/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date