

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000027896

FILED
Feb 16, 2011
Secretary of State

Entity Name: CONCRETE REINFORCEMENT SOLUTIONS, LLC

Current Principal Place of Business:

217 N. COLLIER BLVD., STE 102
MARCO ISLAND, FL 34145

New Principal Place of Business:

950 N. COLLIER BLVD.
420
MARCO ISLAND, FL 34145

Current Mailing Address:

217 N. COLLIER BLVD., STE 102
MARCO ISLAND, FL 34145

New Mailing Address:

950 N. COLLIER BLVD.
420
MARCO ISLAND, FL 34145

FEI Number: 27-2463452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MINCK, LINDA R ESQ
9132 STRADA PLACE
3RD FLOOR
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

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

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: NOLTON, MATT H
Address: 950 N. COLLIER BLVD., STE 420
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGR
Name: TIMMERMAN, JAMES E
Address: 950 N. COLLIER BLVD., STE 420
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGR
Name: CARMIGNANI, A. BROOKS
Address: 785 DOVE COURT
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGR
Name: GILMORE, BRIAN
Address: 950 N. COLLIER BLVD., STE 420
City-St-Zip: MARCO ISLAND, FL 34145

I hereby 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: A. BROOKS CARMIGNANI

MGR

02/16/2011

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