## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 10, 2006 08:00 AM Secretary of State

THE OBLIGATURE  SIGNATURE  Filling Fee is \$50.00  Due by May 1, 2006  TITLE  MGR  DENICHILO, NICHOLAS M  DENICHILOR, NICHOLAS M  MILLBURN, NJ 07041  TITLE  MGR  BURCHERORESS  CITY-ST-ZP  TITLE  MGR  BLACKBURN, MICHAEL O  STREET ADDRESS  CITY-ST-ZP  TITLE  MGR  BLACKBURN, MICHAEL O  STREET ADDRESS  CITY-ST-ZP  TITLE  MGR  BLACKBURN, NJ 07041  TITLE  MGR  Change  Addition  Addition  TITLE  MGR  CHANGE  CHANGE  TITLE  MGR  ADDITIONS/CHANGES  UD0000500433  U00000500433  U0	DOCUMENT # M0300001077  1. Entity Name HATCH MOTT MACDONALD OPERATING SERVICES, LLC					Secretai	ry of State	e	
ATTIL ECAL DEPT.  MILEURAN, NJ 07041  2. Principal Prison of Bushess  Suite, Apl. #, etc.  Suite, Apl. #, etc.  Suite, Apl. #, etc.  Suite, Apl. #, etc.  City & State  Ci	Principal Plac	ce of Business -	Mailing Address						
Suite, Apt. 8, etc.	ATTN: LEGAL DEPT.		ATTN: LEGAL DEPT.			H <b>erei</b> (11 <b>er</b> e)			
City & State	2. Principal Place of Business		3. Mailing Address						
21p	Suite, Apt. #, etc.		Suite, Apt. #, etc.		01042006	Chg-LLC	CR2E083 (11/05)	-	
Signature layer and Address of Current Registrored Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324  Sincer Address (P.O. Box Number is Not Acceptable)  Sincer Address (P.O. Box Number is Not Acceptable)  FL Zip Code  City FL Zip Code  Sincer Address (P.O. Box Number is Not Acceptable)  City In the State of Florida. Cam lemiliar with, and acceptive obligations of registered agent. or both, in the State of Florida. Cam lemiliar with, and acceptive obligations of registered agent.  SIGNATURE  Signature, spind or private named entity submits this statement for the purpose of changing its registered agent or both, in the State of Florida. Cam lemiliar with, and acceptive obligations of registered agent. or both, in the State of Florida. Cam lemiliar with, and acceptive obligations of registered agent. or both, in the State of Florida. Cam lemiliar with, and acceptive obligations of registered agent.  SIGNATURE  Signature, spind or private named and implement agent and first applicable.  (ASTE Registered Signature Agent styles are spind agent.)  Make check payable to Florida Department of State  Signature agent.  Signatur	City & State		City & State				1	·	
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent.  Filting Fee is \$50.00  Filting Fee is \$50.00  Make check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Department of State  Filting Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of Make Payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Department of State  Filting Fee is \$50.00  Make Check payable to Florida Departm	Zip	Country	Zip	Country	5.,Certificate	e of Status Desired	□ \$5.00 Add	ilional	
C T CORPORATION SYSTEM 12DD SOUTH PINE ISLAND ROAD PLANTATION, FL 33324  2. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent.  2. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent.  2. The above harmed entity submits his statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. It am familiar with, and accept the purpose of changing its registered affice or registered agent, or both, in the State of Florida. It am familiar with, and accept the purpose of changing its registered affice or registered agent, or both, in the State of Florida. It am familiar with, and accept the purpose of changing its registered affice or registered agent, or both, in the State of Florida. It am familiar with, and accept the purpose of changing its registered affice or registered agent, or both, in the State of Florida. It am familiar with, and accept the purpose of changing its registered affice or registered agent, or both, in the State of Florida. It am familiar with, and accept the purpose of Change its acceptance of Florida Department of State  2. The familiar with, and accept the purpose of changing its registered affice or registered agent, or both, in the State of Florida. It am familiar with, and accept the purpose of Florida acceptance of Florida acceptance of Florida Department of State  2. Mark acceptance of Florida Department of State  3. The acceptance of Florida Department of State  3. The acceptance of Florida Department of State  4. ADDITIONS/CHANCES  4.		5. Name and Address of Current I	Registered Agent		7. Name and	d Address of New Re			
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8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am femiliar with, and ecceptive or obligations of registered agent.  SIGNATURE    Signature typed or private men of registered agent and this if applicable.   ORTE. Registered Agent Signature regulated Agent Signature reg				City			Zip Code	•	
Filling Fee Is \$50.00 Due by May 1, 2006  TITLE MGR DENICHINO, NICHOLAS M SIREE ROORSS CITY-ST-2IP MILLBURN, NJ 07041  TITLE MGR	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								
Filing Foo is \$80.00 Due by May 1, 2006  S. MANAGING MEMBERS/MANAGERS  TITLE MGR DENICHILO, NICHOLAS M SIRET ADDRESS TREET ADDRESS CITY-ST-2P TITLE MGR	SIGNATURE	Signature, typed or printed name of registered agent a	and dife if applicable. (NOTE.	Registered Agent signature re	ionified when reinstating)		TATE .	<del></del>	
TITLE NAME DENICHILO, NICHOLAS M 27 BLEEKER STREET STREET STREET STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD Delete MAME STREET ADDRESS OCTY-ST-ZIP MILLBURN, NJ 07041 SOLD DELETE MAME		illing Fee is \$50.00							
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	NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CLTY-ST-219				□ Addition	

Thomas L. Patterson, President