

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000004671

FILED
Apr 27, 2009
Secretary of State

Entity Name: GARVER ENGINEERS, LLC

Current Principal Place of Business:

1010 SOUTH BATTERY STREET
LITTLE ROCK, AR 72202

New Principal Place of Business:

Current Mailing Address:

1010 SOUTH BATTERY STREET
LITTLE ROCK, AR 72202

New Mailing Address:

FEI Number: 01-0733400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGRM () Delete
Name: BENNETT, GARY
Address: 1010 SOUTH BATTERY STREET
City-St-Zip: LITTLE ROCK, AR 72202

Title: MGRM () Delete
Name: FULMER, GLYNN
Address: 1010 SOUTH BATTERY STREET
City-St-Zip: LITTLE ROCK, AR 72202

Title: MGRM () Delete
Name: GRIFFIN, MICHAEL
Address: 1010 SOUTH BATTERY STREET
City-St-Zip: LITTLE ROCK, AR 72202

Title: MGRM () Delete
Name: HAYNES, STEVE
Address: 1350 WEST GOVERNMENT STREET, STE. B
City-St-Zip: BRANDON, MS 39042

Title: MGRM () Delete
Name: HOSKINS, BROCK
Address: 1088 EAST MILLSAP ROAD
City-St-Zip: FAYETTEVILLE, AR 72703

Title: MGRM () Delete
Name: JOHNSON, WILLIAM B
Address: 1010 SOUTH BATTERY STREET
City-St-Zip: LITTLE ROCK, AR 72202

ADDITIONS/CHANGES:

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

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

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

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

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: DAN WILLIAMS

MGRM

04/27/2009

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