

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000022635

Entity Name: PLYCRETE PUMPING, LLC

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

7440 RICHARDSON ROAD
SARASOTA, FL 34240 US

New Principal Place of Business:

Current Mailing Address:

7440 RICHARDSON ROAD
SARASOTA, FL 34240 US

New Mailing Address:

FEI Number: 75-3077675

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YODER, PAUL L
7440 RICHARDSON ROAD
SARASOTA, FL 34240 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: YODER, PAUL L MGRM
Address: 7440 RICHARDSON RD.
City-St-Zip: SARASOTA, FL 34240 US

Title: MGRM () Delete
Name: YODER, DAVID R
Address: 7440 RICHARDSON RD.
City-St-Zip: SARASOTA, FL 34240 US

Title: MGRM () Delete
Name: YODER, TIMOTHY R
Address: 7440 RICHARDSON RD.
City-St-Zip: SARASOTA, FL 34240 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: YODER, DAVID R
Address: 5353 COLONY LAKE LN
City-St-Zip: SARASOTA, FL 34233 US

Title: MGRM (X) Change () Addition
Name: YODER, TIMOTHY R
Address: 5977 BROWN LN
City-St-Zip: SARASOTA, FL 34232 US

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: PAUL L YODER

MGRM

01/07/2008

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