

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030626

Entity Name: NDW CONTRACTING LLC

FILED
Mar 05, 2007
Secretary of State

Current Principal Place of Business:

2409 QUANTUM BLVD
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

2409 QUANTUM BLVD
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 14-1856610

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEIBERG, LORI
2409 QUANTUM BLVD
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

NEIBERG, JOEL D
2409 QUANTUM BLVD
BOYNTON BEACH, FL 33426 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: JOEL D. NEIBERG

03/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NEIBERG, JOEL D
Address: 2409 QUANTUM BLVD
City-St-Zip: BOYNTON BEACH, FL 33426

Title: MGRM () Delete
Name: DECICCO, JOSEPH M
Address: 2409 QUANTUM BLVD
City-St-Zip: BOYNTON BEACH, FL 33426

Title: MGRM () Delete
Name: WILSON, TONY W
Address: 2409 QUANTUM BLVD
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES:

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

Title: () Change () Addition
Name:
Address:
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 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: JOEL D. NEIBERG

MGRM

03/05/2007

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