

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024261

FILED  
Mar 17, 2009  
Secretary of State

**Entity Name:** DAN RUTKOWSKI CONSTRUCTION, L.L.C.

**Current Principal Place of Business:**

121 TRIPLE DIAMOND BLVD. #15  
N. VENICE, FL 34275

**New Principal Place of Business:**

**Current Mailing Address:**

121 TRIPLE DIAMOND BLVD. #15  
N. VENICE, FL 34275

**New Mailing Address:**

**FEI Number:** 30-0183950

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RUTKOWSKI, DAN J  
3164 EWING DR  
VENICE, FL 34292 US

**Name and Address of New Registered Agent:**

RUTKOWSKI, DAN J  
158 PUESTA DEL SOL  
OSPREY, FL 34229 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:

03/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RUTKOWSKI, DAN  
Address: 3164 EWING DR.  
City-St-Zip: VENICE, FL 34292

Title: MGRM ( ) Delete  
Name: RUTKOWSKI, VICKIE  
Address: 3164 EWING DR.  
City-St-Zip: VENICE, FL 34292

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: RUTKOWSKI, DAN  
Address: 158 PUESTA DEL SOL  
City-St-Zip: OSPREY, FL 34229

Title: MGRM (X) Change ( ) Addition  
Name: RUTKOWSKI, VICKIE  
Address: 158 PUESTA DEL SOL  
City-St-Zip: OSPREY, FL 34229

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 RUTKOWSKI

MGR

03/17/2009

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