2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2008
Secretary of State

DOCUMENT# L03000025371

Entity Name: BAUMAN CONTRACTING, LLC

Current Principal Place of Business:

4961 TUSCAROA AVE.
ST. CLOUD, FL 34771 US

New Principal Place of Business:

3931 LAKEVIEW ACRES ROAD
ST. CLOUD, FL 34772 US

Current Mailing Address:

4961 TUSCAROA AVE.
ST. CLOUD, FL 34771 US

New Mailing Address:

3931 LAKEVIEW ACRES ROAD
ST. CLOUD, FL 34772 US

FEI Number: 16-1675728 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAUMAN, DANIEL
4961 TUSCAROA AVE.
ST. CLOUD, FL 34771` US

Name and Address of New Registered Agent:

BAUMAN, DANIEL
3931 LAKEVIEW ACRES ROAD
ST. CLOUD, FL 34772` 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: DANIEL J BAUMAN 01/25/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BAUMAN, DANIEL
Address: 4961 TUSCAROA AVE.
City-St-Zip: ST. CLOUD, FL 34771 US

Title: MGRM (X) Delete
Name: REDMOND, ERIC M
Address: 4961 TUSCAROA AVE.
City-St-Zip: ST. CLOUD, FL 34771 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BAUMAN, DANIEL
Address: 3931 LAKEVIEW ACRES ROAD
City-St-Zip: ST. CLOUD, FL 34772 US

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: DANIEL J BAUMAN MGRM 01/25/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date