2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032234

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

118 MILK ST.

GOVAN, CRAIG

MGR

BOSTON, MA 02109

() Delete

DEERFIELD BEACH, FL 33442

1350 E. NEWPORT CENTER DR, STE 206

Entity Name: CONTRACTORS BUSINESS PARK DEVELOPMENT, LLC

FILED Feb 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1350 E. NEWPORT CENTER DR, STE 206 DEERFIELD BEACH, FL 33442 **Current Mailing Address: New Mailing Address:** 1350 E. NEWPORT CENTER DR, STE 206 DEERFIELD BEACH, FL 33442 FEI Number: 20-0187059 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KAY LAW OFFICES ATTN: JAMES R. KAY, ESQ 700 VILLAGE SQUARÉ CROSSING, STE 102B PALM BEACH GARDENS, FL 33410 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete REIBLING, GUENTHER Name: Name: 1350 E. NEWPORT CENTER DR, STE 206 Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: Title: MGR () Delete Title: () Change () Addition MERRIGAN, PETER Name: Name: Address: 118 MILK ST. Address: City-St-Zip: BOSTON, MA 02109 City-St-Zip: Title: MGR () Delete Title: () Change () Addition KASSOF, LINDA Name: Name: 1350 E. NEWPORT CENTER DR, STE 206 Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: TULLY, SCOTT Name:

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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

() Change () Addition

SIGNATURE: LINDA G. KASSOF MGR 02/05/2009