2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 09, 2008 08:00 A Secretary of State

ANNUAL REPORT							
DOCUMENT # L0300 1. Entity Name BEN BURCH WELDING SERV							
Principal Place of Business	Mailing Address						
17677 MAHAN DR.	17677 MAHAN DR.						
TALLAHASSEE, FL 32309	TALLAHASSEE, FL 32309						

IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, hyped or printer name or registered agent and tale if applicable FILE NOWITE FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS THE MORE BURCH, BEEN F JR. BURCH, BEEN F JR. BURCH, BEEN F JR. TALLAHASSEE, FL 32309 THE MAKE BIRET ADDRSS THE ST WAHAN DR. TALLAHASSEE, FL 32309 THE MILE MILE			1	C. W. C.		
DO NOT WRITE IN THIS SPACE A FEI Number Applied For Acquired For St-22/19/107 St-500 Address of Current Registered Agent	17677 MAH	AN DR.	17677 MAHAN DR.			
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept modelliquitions of registered agent. SIGNATURE Signature, types or private name of registered sport and take if acceptable PILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 3. MANAGING MEMBERS/MANAGERS BURCH, BEN F JR. 10767 MAHAN DR. TALLAHASSEE, FL 32309 DO NOT WRITE INT THIS SPACE DO NOT WRITE INT THIS SPACE	6. Name and Address of Current Registered Agent BURCH, BEN F JR.)E	03262008 No Chg-LLC CR2E083 (12/07) 4. FEI Number		
SIGNATURE Signalure, hybrid or privide name of required agent and tall of application (MOTE: Required Agent signature required when remistaling) PATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U000000883519 B. MANAGING MEMBERS/MANAGERS MARK BURCH, BEN F JR. 17677 MAHAN DR. 17677 MAHAN DR. 17677 MAHAN DR. 17677 MAHAN DR. 1771-ST-2P INIE MAKE SIRET ADDRESS 1771-ST-2P INIE MAKE SIRET ADDRESS 1771-ST-2P INIE MAKE MAKE MAKE MAKE MAKE MAKE MAKE MAK	8. The above	named entity submits this statement for	the purpose of changing its registered	d office or register		
After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 047/22/U8-800016-024 138.75 MGRM BURCH, BEN F JR. 17677 MAHAN DR. 17677 MAHAN DR. 17677 TALLAHASSEE, FL 32309 TILE MANE MIRETADORES 2017/-ST-2IP	SIGNATURE	Signature, typed or printed name of registered agent a	nd Life if applicable (NOTE: Registered /	Agent signature required	when reinstating)	DATE
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NAME STREET ADDRESS	NAME STREET ADDRESS CITY+ST+ZIP					
	NAME STREET ADDRESS CITY-ST-ZIP					

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited hability company or the receiver or trustee empowered toyexecute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MAYAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Ben F Burda St

4-2-08

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Daylime Phone #