

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000052944

FILED
Jan 08, 2009
Secretary of State

Entity Name: RICHARD S. LARKIN GENERAL CONTRACTOR <LLC>

Current Principal Place of Business:

3469 1ST AVE.
ST. JAMES CITY, FL 33956

New Principal Place of Business:

Current Mailing Address:

3469 1ST AVE.
ST. JAMES CITY, FL 33956

New Mailing Address:

FEI Number: 59-2192390

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARKIN, RICHARD S
3469 1ST AVE.
ST. JAMES CITY, FL 33956 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: LARKIN, RICHARD S
Address: 3469 1ST AVE.
City-St-Zip: ST. JAMES CITY, FL 33956

Title: MGR () Delete
Name: LARKIN, BETTY M
Address: 3469 1ST AVE.
City-St-Zip: ST. JAMES CITY, FL 33956

Title: MGR () Delete
Name: MOORE, RICHARD E
Address: 3383 4TH AVE
City-St-Zip: ST. JAMES CITY, FL 33956

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 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: RICHARD LARKIN

MGR

01/08/2009

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