2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2008
Secretary of State

DOCUMENT# L04000010708

Entity Name: RAYMOND J. LEMIEUX MOBILE WELDING SERVICE, LLC

Current Principal Place of Business:

11171 SHIRLEY LN.
N. FT. MYERS, FL 33917

New Principal Place of Business:

Current Mailing Address:

11171 SHIRLEY LN.
N. FT. MYERS, FL 33917

New Mailing Address:

FEI Number: 30-0234555 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEMIEUX, RAYMOND
11171 SHIRLEY LN.
N. FT. MYERS, FL 33917 US

Name and Address of New Registered Agent:

LEMIEUX, CASSANDRA
11171 SHIRLEY LN.
N. FT. MYERS, FL 33917 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: CASSANDRA LEMIEUX 01/08/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LEMIEUX, RAYMOND J
Address: 11171 SHIRLEY LN.
City-St-Zip: N. FT. MYERS, FL 33917

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM ( ) Change (X) Addition
Name: LEMIEUX, CASSANDRA
Address: 11171 SHIRLEY LN.
City-St-Zip: NORTH FORT MYERS, FL 33917

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: CASSANDRA LEMIEUX MGRM 01/08/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date