

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000017813

Entity Name: R.A.W. CONSTRUCTION, LLC

FILED
Jan 20, 2009
Secretary of State

Current Principal Place of Business:

710 LEWIS BLVD SOUTH
TALLAHASSEE, FL 32305 US

New Principal Place of Business:

Current Mailing Address:

710 LEWIS BLVD SOUTH
TALLAHASSEE, FL 32305 US

New Mailing Address:

FEI Number: 05-0597917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARGROVE, BRANT L
2984 WELLINGTON CIRCLE WEST
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

HARGROVE, BRANT L
2104 DELTA WAY STE 9
TALLAHASSEE, FL 32303 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:

01/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WHITE, DON R
Address: P.O. BOX 172
City-St-Zip: SCOTTS HILL, TN 38374 US

Title: MGRG () Delete
Name: SHAFFER, SERENA
Address: 4545 TIMBERLOCH DR
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: MGR () Delete
Name: SHAFFER, MITCHELL W
Address: 4545 TIMBERLOCH DR
City-St-Zip: TALLAHASSEE, FL 32309

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: SERENA SHAFFER

MNGR

01/20/2009

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