

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052814

FILED  
Mar 19, 2009  
Secretary of State

**Entity Name:** PROFESSIONAL BLASTING SERVICES, LLC

**Current Principal Place of Business:**

15465 ALICO ROAD  
FT MYERS, FL 33913

**New Principal Place of Business:**

15401 ALICO ROAD  
FT MYERS, FL 33913

**Current Mailing Address:**

15465 ALICO ROAD  
FT MYERS, FL 33913

**New Mailing Address:**

15465 PINE RIDGE RD  
FT MYERS, FL 33908

**FEI Number:** 20-3098672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

YOUNGQUIST, BRETT  
15465 ALICO ROAD  
FT MYERS, FL 33913 US

**Name and Address of New Registered Agent:**

YOUNGQUIST, BRETT  
15401 ALICO ROAD  
FT MYERS, FL 33913 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:

03/19/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: YOUNGQUIST, HARVEY BRUCE  
Address: 15465 ALICO ROAD  
City-St-Zip: FT MYERS, FL 33913

Title: MGR ( ) Delete  
Name: YOUNGQUIST, TIMOTHY GUSTAV  
Address: 15465 ALICO ROAD  
City-St-Zip: FT MYERS, FL 33913

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: YOUNGQUIST, HARVEY BRUCE  
Address: 15465 PINE RIDGE RD  
City-St-Zip: FT MYERS, FL 33908

Title: MGR (X) Change ( ) Addition  
Name: YOUNGQUIST, TIMOTHY GUSTAV  
Address: 15465 PINE RIDGE RD  
City-St-Zip: FT MYERS, FL 33908

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: TIMOTHY YOUNGQUIST

MGR

03/19/2009

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