

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000068361

FILED  
Jun 26, 2009  
Secretary of State

**Entity Name:** SELECT CUSTOM STRUCTURES, LLC

**Current Principal Place of Business:**

36324 CALHOUN ROAD  
EUSTIS, FL 32736

**New Principal Place of Business:**

13215 GRAND TERRACE DRIVE  
GRAND ISLAND, FL 32735

**Current Mailing Address:**

36324 CALHOUN ROAD  
EUSTIS, FL 32736

**New Mailing Address:**

13215 GRAND TERRACE DRIVE  
GRAND ISLAND, FL 32735

FEI Number: 20-1710995      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MCNULTY, DAWN L  
36324 CALHOUN ROAD  
EUSTIS, FL 32736    US

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

MCNULTY, DAWN L  
13215 GRAND TERRACE DRIVE  
GRAND ISLAND, FL 32735    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: \_\_\_\_\_

06/26/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: MCNULTY, DAWN L  
Address: 36324 CALHOUN ROAD  
City-St-Zip: EUSTIS, FL 32736

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: MCNULTY, DAWN L  
Address: 13215 GRAND TERRACE DRIVE  
City-St-Zip: GRAND ISLAND, FL 32735

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: DAWN L MCNULTY

MM

06/26/2009

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