

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070600

Entity Name: ACY CONTRACTORS, LLC

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

6160 EDGEWATER DR, STE C
ORLANDO, FL 32810

New Principal Place of Business:

6160 EDGEWATER DR,
SUITE C
ORLANDO, FL 32810

Current Mailing Address:

P O BOX 683376
ORLANDO, FL 32868

New Mailing Address:

P.O. BOX 683376
ORLANDO, FL 32868

FEI Number: 90-0334210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARRINGTON, MICHAEL
2571 BREEZY MEADOW RD
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

ARRINGTON, MICHAEL
2894 PARK MEADOW DRIVE
APOPKA, FL 32703 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:

04/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: ARRINGTON, MICHAEL
Address: 2571 BREEZY MEADOW RD
City-St-Zip: APOPKA, FL 32712

Title: MGR () Delete
Name: ARRINGTON, MICHAEL
Address: 2571 BREEZY MEADOW RD
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: ARRINGTON, MICHAEL
Address: 2894 PARK MEADOW DRIVE
City-St-Zip: APOPKA, FL 32703

Title: VP (X) Change () Addition
Name: YOUNG, MICHAEL
Address: 640 ERROL PARKWAY
City-St-Zip: APOPKA, FL 32712

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: MICHAEL YOUNG

VP

04/07/2009

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