

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000082744

Entity Name: H & L ASPHALT LLC

FILED
May 11, 2005
Secretary of State

Current Principal Place of Business:

4143 BLACK POWDER WAY
KISSIMMEE, FL 34746 US

New Principal Place of Business:

Current Mailing Address:

4143 BLACK POWDER WAY
KISSIMMEE, FL 34746 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

Name and Address of New Registered Agent:

HUFFMAN, TIM
4143 BLACK POWDER WAY
KISSIMMEE, FL 34746 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: HUFFMAN, TIM
Address: 4143 BLACK POWDER WAY
City-St-Zip: KISSIMMEE, FL 34746 US

Title: MGRM () Delete
Name: LONTZ, JOHN
Address: 4143 BLACK POWDER WAY
City-St-Zip: KISSIMMEE, FL 34746 US

ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), 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: TIM HUFFMAN

MGRN

05/11/2005

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