

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT (AR) DUE BY MAY 1, 2008**

**FILED**  
**May 21, 2008 8:00 am**  
**Secretary of State**

05-21-2008 90204 042 \*\*\*138.75

**DOCUMENT # L05000017069**

1. Entity Name

BLACK DIAMOND EXCAVATING, LLC



Principal Place of Business

1418 LANE AVENUE NORTH  
JACKSONVILLE FL 32220

Mailing Address

1418 LANE AVENUE  
JACKSONVILLE FL 32220

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3797945

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BLONG, CHARLES S  
1418 LANE AVENUE NORTH  
JACKSONVILLE FL 32220

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent's signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008, Fee Will Be \$538.75**  
**Make Check Payable to Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☒ Delete  
NAME BLONG, CHARLES S  
STREET ADDRESS 1418 LANE AVENUE NORTH  
CITY-ST-ZIP JACKSONVILLE FL 32220

TITLE MGRM ☐ Delete  
NAME BLONG, STEWART O JR  
STREET ADDRESS 1418 LANE AVENUE NORTH  
CITY-ST-ZIP JACKSONVILLE FL 32220

TITLE MGRM ☐ Delete  
NAME SMITH, CLAUDE D  
STREET ADDRESS 1418 LANE AVENUE NORTH  
CITY-ST-ZIP JACKSONVILLE FL 32220

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE PRES ☒ Change ☐ Addition  
NAME BLONG, CHARLES S.  
STREET ADDRESS 1418 LANE AVE N.  
CITY-ST-ZIP JACKSONVILLE, FL. 32254

TITLE U.P./SEC. ☐ Change ☒ Addition  
NAME BLONG, DENISE S.  
STREET ADDRESS 1418 LANE AVE. N.  
CITY-ST-ZIP JACKSONVILLE, FL. 32254

TITLE MGRM ☐ Change ☒ Addition  
NAME WHITTAKER, DAN  
STREET ADDRESS 1418 LANE AVE N.  
CITY-ST-ZIP JACKSONVILLE, FL. 32254

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Original Price

*Charles S. Blong* PRES. CHARLES S. BLONG 4/29/08 904-781-4100