

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000019873

Entity Name: EUROPEAN PAVERS, L.L.C.

FILED
Feb 16, 2009
Secretary of State

Current Principal Place of Business:

10951 HARMONY PARK, UNIT 2
BONITA SPRINGS, FL 34135

New Principal Place of Business:

10957 K-NINE DRIVE
BONITA SPRINGS, FL 34135

Current Mailing Address:

10951 HARMONY PARK, UNIT 2
BONITA SPRINGS, FL 34135

New Mailing Address:

10957 K-NINE DRIVE
BONITA SPRINGS, FL 34135

FEI Number: 20-2486146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, KEVIN
10951 HARMONY PARK, UNIT 2
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

SULLIVAN, KEVIN
10957 K-NINE DRIVE
BONITA SPRINGS, FL 34135 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:

02/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SULLIVAN, KEVIN
Address: 2191 PINE WOODS CIR.
City-St-Zip: NAPLES, FL 34105

Title: VP () Delete
Name: O'CONNOR, DAVID E
Address: 10951 HARMONY PARK, UNIT 2
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: O'CONNOR, DAVID E
Address: 2156 HARLANS RUN
City-St-Zip: NAPLES, FL 34105

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: DAVID O'CONNOR

VP

02/16/2009

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