2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# L05000033071

Entity Name: T & S CONSTRUCTION, L.L.C.

Current Principal Place of Business:

2012 POLLARD HARRIS RD.
BONIFAY, FL 32425

New Principal Place of Business:

Current Mailing Address:

2012 POLLARD HARRIS RD.
BONIFAY, FL 32425

New Mailing Address:

FEI Number: 20-2662108 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRENCH, TRAVIS
2012 POLLARD HARRIS RD.
BONIFAY, FL 32425 US

Name and Address of New Registered Agent:

FRENCH, SHERRY
2012 POLLARD HARRIS RD.
BONIFAY, FL 32425 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: SHERRY FRENCH 04/30/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	FRENCH, TRAVIS	
Address:	2012 POLLARD HARRIS RD.	
City-St-Zip:	BONIFAY, FL 32425	
Title:	MGRM	( ) Delete
Name:	FRENCH, FARRELL	
Address:	2004 POLLARD HARRIS ROAD	
City-St-Zip:	BONIFAY, FL 32425	
Title:	MGRM	(X) Delete
Name:	CARNLEY, MICHAEL	
Address:	2267 CACTUS DRIVE	
City-St-Zip:	BONIFAY, FL 32425	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: TRAVIS FRENCH MGRM 04/30/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date