

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000067050

FILED
May 17, 2007
Secretary of State

Entity Name: TACUMSA CONTRACTING LLC

Current Principal Place of Business:

5185W DUNNELON RD
STE B
DUNNELON, FL 34433

New Principal Place of Business:

7719 NORTH HELLER AVE.
DUNNELON, FL 34433

Current Mailing Address:

5185W DUNNELON RD
STE B
DUNNELON, FL 34433

New Mailing Address:

4641 SOUTH SLASH PINE AVE.
HOMOSASSA, FL 34446

FEI Number: 03-0559805 FEI Number Applied For () FEI Number Not Applicable () 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:

BOYINGTON, SHARON F
4641 S. SLASH PINE AVE.
HOMOSASSA, FL 34446 US

Name and Address of New Registered Agent:

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/MANAGERS:

Title: MGR () Delete
Name: BOYINGTON, SHARON
Address: 4641 S. SLASH PINE AVE.
City-St-Zip: HOMOSASSA, FL 34446

Title: MGRM () Delete
Name: WARD, VINCENT
Address: 4641 S. SLASH PINE AVE.
City-St-Zip: HOMOSASSA, FL 34446

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 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: SHARON F BOYINGTON

MANA

05/17/2007

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