

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000080212

**FILED**  
**Jan 13, 2009**  
**Secretary of State**

**Entity Name:** ORCHID ISLAND CONSTRUCTION LLC

**Current Principal Place of Business:**

680 HWY A1A UNIT 2  
VERO BEACH, FL 32963

**New Principal Place of Business:**

**Current Mailing Address:**

680 HWY A1A UNIT 2  
VERO BEACH, FL 32963

**New Mailing Address:**

**FEI Number:** 38-3740567

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEMAN, DOUGLAS A  
680 HWY A1A UNIT 2  
VERO BEACH, FL 32963 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: MGRM ( ) Delete  
Name: LEMAN, DOUGLAS A  
Address: 680 HWY A1A UNIT 2  
City-St-Zip: VERO BEACH, FL 32963

**ADDITIONS/CHANGES:**

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: DOUGLAS A LEMAN

PRES

01/13/2009

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