## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000093029

Entity Name: HIGH STRENGTH STRUCTURES, LLC

**FILED** Apr 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

9517 SPRING BLOSSOM CT. 10365 HOOD ROAD SOUTH AMELIA ISLAND, FL 32034 LIS

SUITE 207

JACKSONVILLE, FL 32257

**Current Mailing Address: New Mailing Address:** 

10365 HOOD ROAD SOUTH P. O. BOX 16480

AMELIA ISLAND, FL 32034 US SUITE 207

JACKSONVILLE, FL 32257 US

FEI Number: 03-0593395 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CHAUNCEY, RAYMOND M STANLEY, NEWMAN E 9517 SPRING BLOSSOM CT. 10365 HOOD ROAD SOUTH AMELIA ISLAND, FL 32034 SUITE 207

JACKSONVILLE, FL 32257 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: NEWMAN E. STANLEY 04/30/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete (X) Change ( ) Addition STANLEY, NEWMAN E STANLEY, NEWMAN E Name: Name:

Address: 4572 HISTORICAL TRAIL COVE Address: 4572 HISTORICAL TRAIL COVE City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32225

(X) Change ( ) Addition Title: Title: MGR ( ) Delete Name: CHAUNCEY, RAYMOND M Name: CHAUNCEY, RAYMOND M Address: 9517 SPRING BLOSSOM CT Address: 9517 SPRING BLOSSOM CT City-St-Zip: AMELIA ISLAND, FL 32034 City-St-Zip: AMELIA ISLAND, FL 32034

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: NEWMAN E. STANLEY **PRES** 04/30/2008