

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000116434

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** BSB PIPELINE SPECIALTIES, LLC

**Current Principal Place of Business:**

930 SOUTHRIDGE TRAIL  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 160340  
ALTAMONTE SPRINGS, FL 32716 US

**New Mailing Address:**

930 SOUTHRIDGE TRAIL  
ALTAMONTE SPRINGS, FL 32714

**FEI Number:** 20-3894007

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BERKSON, GARY M  
111 NORTH ORANGE AVENUE, SUITE 1200  
ORLANDO, FL 32801 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  
Name: BOTTS, BRENDA S  
Address: 930 SOUTHRIDGE TRAIL  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby 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: BRENDA BOTTS

MGR

04/27/2010

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