

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000117

FILED
Feb 05, 2008
Secretary of State

Entity Name: BENCHMARK FENCE AND RAIL LLC.

Current Principal Place of Business:

402 SWEETWATER BLVD. N.
LONGWOOD, FL 32779

New Principal Place of Business:

1155 MCGREGOR RD
DELAND, FL 32720

Current Mailing Address:

402 SWEETWATER BLVD. N.
LONGWOOD, FL 32779

New Mailing Address:

1155 MCGREGOR RD
DELAND, FL 32720

FEI Number: 20-4011409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CALKINS, FRED J
402 SWEETWATER BLVD. N.
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

CALKINS, FRED J
1155 MCGREGOR RD
DELAND, FL 32720 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:

02/05/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CALKINS, FRED J
Address: 402 SWEETWATER BLVD. N.
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM () Delete
Name: CALKINS, MARY K
Address: 402 SWEETWATER BLVD. N.
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CALKINS, FRED J
Address: 1155 MCGREGOR RD
City-St-Zip: DELAND, FL 32720

Title: MGRM (X) Change () Addition
Name: CALKINS, MARY K
Address: 1155 MCGREGOR RD
City-St-Zip: DELAND, FL 32720

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: FRED CALKINS

MGRM

02/05/2008

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