

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000356

FILED  
May 15, 2009  
Secretary of State

Entity Name: ACE CONCRETE CUTTING, LLC

**Current Principal Place of Business:**

6949 KEITHAN ROAD  
JACKSONVILLE, FL 32220

**New Principal Place of Business:**

510 EAST MINNESOTA AVE  
MACCLENNY, FL 32063

**Current Mailing Address:**

6949 KEITHAN ROAD  
JACKSONVILLE, FL 32220

**New Mailing Address:**

PO BOX 2054  
MACCLENNY, FL 32063

FEI Number: 20-4072814      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

BEAN, GERALD M JR.  
510 E. MINNESOTA AVE  
MACCLENNY, FL 32063      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: BEAN, GERALD M JR.  
Address: 510 E. MINNESOTA AVE  
City-St-Zip: MACCLENNY, FL 32063

**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: GERALD M BEAN JR

MR

05/15/2009

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