

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000044634

FILED
Feb 10, 2009
Secretary of State

Entity Name: NEW CONSTRUCTION SERVICES, LLC

Current Principal Place of Business:

12001 NW 147TH PLACE
ALACHUA, FL 32616 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 140336
GAINESVILLE, FL 326140336 US

New Mailing Address:

FEI Number: 20-4808889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LILLIE, EDDIE L
12001 NW 147TH PLACE
ALACHUA, FL 32616 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: LILLIE, EDDIE L
Address: 12001 NW 147TH PLACE
City-St-Zip: ALACHUA, FL 32616 US

Title: MGRM () Delete
Name: WHANN, NOLA E
Address: 14317 NW 41ST AVENUE
City-St-Zip: NEWBERRY, FL 32669 US

Title: MGRM () Delete
Name: MYERS, LESLEY P
Address: 5503 SW 92ND WAY
City-St-Zip: GAINESVILLE, FL 32608 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EDWARD B MYERS

ACCT

02/10/2009

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