2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 30, 2012
Secretary of State

DOCUMENT# L06000093326

Entity Name: RELIANCE PROJECT MANAGEMENT, LLC

Current Principal Place of Business:

47 BUNKER LANE
ROTONDA WEST, FL 33947

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 8
CAPE HAZE, FL 33946 US

New Mailing Address:

FEI Number: 20-5599898 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MEAKINS, TIMOTHY
47 BUNKER LANE
ROTONDA WEST, FL 33947 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: MR.
Name: TIMOTHY MEAKINS
Address: P.O.BOX 8
City-St-Zip: CAPE HAZE, FL 33946

Title: MS.
Name: AMANDAMEAKINS
Address: P.O.BOX 8
City-St-Zip: CAPE HAZE, FL 33946 US

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 Statues.

SIGNATURE: TIMOTHY MEAKINS MR. 01/30/2012

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