

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000122254

FILED  
Jul 04, 2007  
Secretary of State

**Entity Name:** TOMMY'S WELDING SERVICE LLC

**Current Principal Place of Business:**

20289 EDGEWOOD ROAD  
N. FORT MYERS, FL 33917

**New Principal Place of Business:**

**Current Mailing Address:**

20289 EDGEWOOD ROAD  
N. FORT MYERS, FL 33917

**New Mailing Address:**

FEI Number: 20-8182365      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

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

SISK, THOMAS EDWARD  
20289 EDGEWOOD ROAD  
N. FORT MYERS, FL 33917      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: SISK, THOMAS EDWARD  
Address: 20289 EDGEWOOD ROAD  
City-St-Zip: N. FORT MYERS, FL 33917

**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: THOMAS E SISK

MGR

07/04/2007

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