

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000047549

FILED
Apr 26, 2008
Secretary of State

Entity Name: CONSTRUCTION MANAGEMENT SOLUTIONS L.L.C.

Current Principal Place of Business:

924 VISTA RIDGE LN
SHAKOPEE, MN 55379

New Principal Place of Business:

Current Mailing Address:

924 VISTA RIDGE LN
SHAKOPEE, MN 55379

New Mailing Address:

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

Name and Address of Current Registered Agent:

MIZELL, SCOTT W
17601 WINDY PINE ST
MONTVERDE, FL 34756 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: MGR () Delete
Name: MIZELL, CAROL H
Address: 924 VISTA RIDGE LN
City-St-Zip: SHAKOPEE, MN 55379

Title: MGRM () Delete
Name: MIZELL, WILLIAM O
Address: 924 VISTA RIDGE LN
City-St-Zip: SHAKOPEE, MN 55379

ADDITIONS/CHANGES:

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: CAROL H. MIZELL

MGR

04/26/2008

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