

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000053073

FILED
Jan 28, 2008
Secretary of State

Entity Name: D. BELL GENERAL CONTRACTING, LLC

Current Principal Place of Business:

2441 VERMONT STREET
WEST MELBOURNE, FL 32904

New Principal Place of Business:

2885 ELECTRONICS DR.
A-6
MELBOURNE, FL 32935

Current Mailing Address:

2441 VERMONT STREET
WEST MELBOURNE, FL 32904

New Mailing Address:

2885 ELECTRONICS DR.
A-6
MELBOURNE, FL 32935

FEI Number: 26-0153193

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAIRBANKS, DENNIS F
1600 SARNO ROAD, SUITE 1
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

BELL, CHRISTOPHER D
1670 HARLOCK RD.
MELBOURNE, FL 32934 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: C. DAVID BELL

01/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BELL, RICK
Address: 2441 VERMONT STREET
City-St-Zip: WEST MELBOURNE, FL 32904

Title: MGR () Delete
Name: BELL, DAVID
Address: 2441 VERMONT STREET
City-St-Zip: WEST MELBOURNE, FL 32904

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: BELL, DAVID
Address: 1670 HARLOCK RD
City-St-Zip: MELBOURNE, FL 32934

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: C. DAVID BELL

MGR

01/28/2008

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