2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 10, 2009
Secretary of State

DOCUMENT# L07000091467

Entity Name: DOUGLAS E. CSONT CERTIFIED RESIDENTIAL CONTRACTOR, L.L.C.

Current Principal Place of Business:

5255 HIGHWAY 60
BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 3159
HAINES CITY, FL 338453159

New Mailing Address:

FEI Number: 26-1092531 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CSCONT, DOUGLAS E
5255 HIGHWAY 60
BARTOW, FL 33830 US

Name and Address of New Registered Agent:

CSONT, DOUGLAS E
5255 HIGHWAY 60
BARTOW, FL 33830 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: DOUGLAS E. CSONT 01/10/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: CSONT, DOUGLAS E
Address: 5255 HIGHWAY 60
City-St-Zip: BARTOW, FL 33830

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: DOUGLAS E. CSONT MGRM 01/10/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date