

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000080966

FILED
Apr 30, 2009
Secretary of State

Entity Name: AFFORDABLE DRAINAGE SOLUTIONS, LLC

Current Principal Place of Business:

2090 SW HAYWORTH AVE
PORT ST LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

2090 SW HAYWORTH AVE
PORT ST LUCIE, FL 34953

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHEIB, JAMES M
2090 SW HAYWORTH AVE
PORT ST LUCIE, FL 34953 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: HARVEY, WILLIAM L II
Address: 2090 SW HAYWORTH AVE
City-St-Zip: PORT ST LUCIE, FL 34953

Title: MGR () Delete
Name: SCHEIB, JAMES M
Address: 2090 SW HAYWORTH AVE
City-St-Zip: PORT ST LUCIE, FL 34953

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: JAMES M SCHEIB

MGR

04/30/2009

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