

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000011929

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** DAWKINS/LUMPKIN CONTRACTING & CONSULTING SOLUTIONS L.L.C.

**Current Principal Place of Business:**

10920 BAYMEADOWS ROAD, 27-205  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

2731 EXECUTIVE PARK DR., SUITE 4  
WESTON, FL 33331

**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:**

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: MGRM  
Name: DAWKINS, HAROLD  
Address: 10920 BAYMEADOWS ROAD, 27-205  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM  
Name: LUMPKIN, ALTON  
Address: 9114 HANOVER STREET  
City-St-Zip: LITHIA SPRINGS, GA 30122

I hereby 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: HAROLD DAWKINS

MGRM

04/26/2011

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