

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000022435

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** LARMIN CONTRACTING SERVICES LLC

**Current Principal Place of Business:**

4114 CARROLLWOOD VILLAGE DR  
TAMPA, FL 33618

**New Principal Place of Business:**

1418 EAST BUSCH BOULEVARD  
311  
TAMPA, FL 33612

**Current Mailing Address:**

4114 CARROLLWOOD VILLAGE DR  
TAMPA, FL 33618

**New Mailing Address:**

1418 EAST BUSCH BOULEVARD  
311  
TAMPA, FL 33612

**FEI Number:** 27-4116308

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HALES, THOMAS R  
9724 N. ARMENIA AVE.  
SUITE 200  
TAMPA, FL 33612 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:** P  
**Name:** MINARDI, JOSEPH R  
**Address:** 1418 EAST BUSCH BOULEVARD SUITE 311  
**City-St-Zip:** TAMPA, FL 33612

**Title:** VP  
**Name:** LARSON, JOSEPH M  
**Address:** 1418 EAST BUSCH BOULEVARD SUITE 311  
**City-St-Zip:** TAMPA, FL 33612

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:** JOSEPH R MINARDI

PRES

04/16/2012

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