2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M00000000223

1. Entity Name

HARDIN CONSTRUCTION COMPANY, LLC



FILED Jan 29, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1380 WEST PACES FERRY ROAD, N.W. ATLANTA, GA 30327

1380 WEST PACES FERRY ROAD, N.W. ATLANTA, GA 30327



01192007 No Chg-LLC

CR2E083 (11/05)

Daytime Phone #

4. FEI Number 58-2508225

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331

the obligations of registered agent.

CITY-ST-ZIP

SIGNATURE:

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SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating) DATE	
Fi D	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THE HARDIN GROUP, LLC 1380 WEST PACES FERRY ROAD, NW ATLANTA, GA 30327	U00000610110 02/02/07-80009-015 50.0)O
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BACHMAN, STEPHEN C 1380 WEST PACES FERRY ROAD, NW ATLANTA, GA 30327	And the second s	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HAIR, CARL M 1380 WEST PACES FERRY ROAD, NW ATLANTA, GA 30327	DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM O'HARA, JOHN P 1380 WEST PACES FERRY ROAD, NW ATLANTA, GA 30327	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM TRAEGER, JEFFREY R 1380 WEST PACES FERRY ROAD, NW ATLANTA, GA 30327		
TITLE NAME STREET ADDRESS		property and the contraction of	i

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

NING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

8. 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. 1 am familiar with, and accept