

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003323

FILED
Feb 07, 2008
Secretary of State

Entity Name: GLEESON CONSTRUCTORS, L.L.C.

Current Principal Place of Business:

2015 E 7TH STREET
SIOUX CITY, IA 51101

New Principal Place of Business:

Current Mailing Address:

PO BOX 625
SIOUX CITY, IA 511020625 US

New Mailing Address:

FEI Number: 76-0729090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: GCI, INC.,
Address: 2015 E 7TH STREET PO BOX 625
City-St-Zip: SIOUX CITY, IA 51101

Title: P () Delete
Name: VANDEZANDSCHULP, HARLAN
Address: 2015 E 7TH ST
City-St-Zip: SIOUX CITY, IA 51101

Title: EVP () Delete
Name: RENS, RONALD L
Address: 2015 E 78TH ST
City-St-Zip: SIOUX CITY, IA 51101

Title: ST () Delete
Name: DESMIDT, ROBERT J
Address: 2015 E 7TH ST
City-St-Zip: SIOUX CITY, IA 51101

Title: VP () Delete
Name: BLACK, JAMES A
Address: 2015 E 7TH ST
City-St-Zip: SIOUX CITY, IA 51101

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT J. DESMIDT

ST

02/07/2008

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