2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2005 08:00 AM
Secretary of State

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1. Entity Name
SHAW-ROBOTIC ENVIRONMENTAL SERVICES, L.L.C.

Principal Place of Business	Mailing Address
4171 ESSEN LANE BATON ROUGE, LA 70809	4171 ESSEN LANE BATON ROUGE, LA 70809

02072005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0426083
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BARFIELD, T.A. JR.
STREET ADDRESS	4171 ESSEN LANE
CITY-ST-ZIP	BATON ROUGE, LA 70809
TITLE	MGR
NAME	GRAPHIA, GARY P
STREET ADDRESS	4171 ESSEN LANE
CITY-ST-ZIP	BATON ROUGE, LA 70809
TITLE	MGR
NAME	BEVAN, GEORGE P
STREET ADDRESS	4171 ESSEN LANE
CITY-ST-ZIP	BATON ROUGE, LA 70809
TITLE	MGR
NAME	LAGRANGE, SCOTT P
STREET ADDRESS	19052 WEST PINNACLE CIR.
CITY-ST-ZIP	BATON ROUGE, LA 70801
TITLE	MGR
NAME	LEWIS, JAMES R
STREET ADDRESS	450 LAUREL STREET SUITE 1600
CITY-ST-ZIP	BATON ROUGE, LA 70801
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000001216437
04/19/05-80071-024 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: _____ February 1, 2005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Gary P. Graphia (225)932-2500