

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004458

Entity Name: A & B DOZING LLC

FILED  
May 01, 2009  
Secretary of State

**Current Principal Place of Business:**

2445 EASTMAN LANE  
CANTONMENT, FL 32533

**New Principal Place of Business:**

**Current Mailing Address:**

15930 CO. RD.  
EDGAR SPRINGS, MO 65462

**New Mailing Address:**

6355  
SALEM, MO 65560

FEI Number: 80-0123379      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

BURGDORF, ALFRED  
2445 EASTMAN LANE  
CANTONMENT, FL 32533      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      ( ) Delete  
Name: BURGDORF, ALFRED  
Address: 2445 EASTMAN LANE  
City-St-Zip: CANTONMENT, FL 32533

Title: MGR      ( ) Delete  
Name: HERRMANN, DOROTHY L  
Address: 15930 CO. RD 6280  
City-St-Zip: EDGAR SPRINGS, MO 65462

**ADDITIONS/CHANGES:**

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: DOROTHY HERRMANN

MGR

05/01/2009

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