

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006690

FILED
Jan 19, 2009
Secretary of State

Entity Name: MORSEY CONSTRUCTORS, LLC

Current Principal Place of Business:

959 DR. SMITH LN
CALVERT CITY, KY 42029

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 558
CALVERT CITY, KY 42029

New Mailing Address:

FEI Number: 20-5544676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: HARPER, BILLY
Address: 960 H.C. MATHIS DRIVE
City-St-Zip: PADUCAH, KY 42001

Title: MGRM () Delete
Name: SIENER, JASON W
Address: 959 DR. SMITH LANE
City-St-Zip: CALVERT CITY, KY 42029

Title: MGRM () Delete
Name: ROSE, GRETTA G
Address: 959 DR. SMITH LANE
City-St-Zip: CALVERT CITY, KY 42029

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:

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: GRETTA ROSE

MGR

01/19/2009

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