

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000001891

FILED  
Feb 25, 2011  
Secretary of State

**Entity Name:** GROUND & PIPE CONSTRUCTION, LLC

**Current Principal Place of Business:**

260 COMMERCE STREET, SUITE 320  
MONTGOMERY, AL 36104

**New Principal Place of Business:**

**Current Mailing Address:**

260 COMMERCE STREET, SUITE 320  
MONTGOMERY, AL 36104

**New Mailing Address:**

**FEI Number:** 47-0873107

**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: MGR  
Name: MCINNIS, CHARLES R  
Address: 260 COMMERCE STREET, SUITE 320  
City-St-Zip: MONTGOMERY, AL 36104

Title: MGR  
Name: MCINNIS, JOHN M JR.  
Address: 260 COMMERCE STREET, SUITE 320  
City-St-Zip: MONTGOMERY, AL 36104

Title: MGR  
Name: MCINNIS, TIMOTHY N  
Address: 260 COMMERCE STREET, SUITE 320  
City-St-Zip: MONTGOMERY, AL 36104

Title: MGR  
Name: MORGAN, SPENCER  
Address: 260 COMMERCE STREET, SUITE 320  
City-St-Zip: MONTGOMERY, AL 36104

Title: MGR  
Name: PARRISH, STEVAN M  
Address: 260 COMMERCE STREET, SUITE 320  
City-St-Zip: MONTGOMERY, AL 36104

I hereby 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: STEVAN PARRISH

MGRM

02/25/2011

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