

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000002228

**FILED**  
**Mar 28, 2012**  
**Secretary of State**

**Entity Name:** BLUEWATER CIVIL DESIGN, LLC

**Current Principal Place of Business:**

201 CIRCLE SLOPE DRIVE  
SIMPSONVILLE, SC 29681

**New Principal Place of Business:**

211 CIRCLE SLOPE DRIVE  
SIMPSONVILLE, SC 29681

**Current Mailing Address:**

201 CIRCLE SLOPE DRIVE  
SIMPSONVILLE, SC 29681

**New Mailing Address:**

211 CIRCLE SLOPE DRIVE  
SIMPSONVILLE, SC 29681

**FEI Number:** 27-2826165

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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:** PRICE, CHRISTOPHER L  
**Address:** 37 WEDGEWOOD DR  
**City-St-Zip:** GREENVILLE, SC 29609

**Title:** MGR  
**Name:** HENDERSON, JASON S  
**Address:** 404 E. CAMPERDOWN WAY  
**City-St-Zip:** GREENVILLE, SC 29601

**Title:** MGR  
**Name:** SOLESBEE, LYNN A  
**Address:** 211 CIRCLE SLOPE DR  
**City-St-Zip:** GREENVILLE, SC 29681

**Title:** MGR  
**Name:** HARRISON, PAUL J  
**Address:** 7 HYDE PARK LANE  
**City-St-Zip:** MAULDIN, SC 29662

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:** CHRISTOPHER L. PRICE

MGR

03/28/2012

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