

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000104452

Entity Name: BLACKWATER TRUSS SYSTEMS, LLC**Current Principal Place of Business:**6603 OLD BAAGDAD HWY
MILTON, FL 32583**Current Mailing Address:**PO BOX 186
BAGDAD, FL 32530**FEI Number:** 27-1303926**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SMITH, J KENNETH
6603 OLD BAAGDAD HWY
MILTON, FL 32583 US*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**Authorized Person(s) Detail :**

Title	MGRM
Name	SMITH, J KENNETH
Address	6603 OLD BAAGDAD HWY
City-State-Zip:	MILTON FL 32583

Title	MGRM
Name	SMITH, K. DAVID
Address	6603 OLD BAAGDAD HWY
City-State-Zip:	MILTON FL 32583

Title	MGRM
Name	SMITH, FAYE E
Address	6603 OLD BAAGDAD HWY
City-State-Zip:	MILTON FL 32583

Title	MGRM
Name	SMITH, MEREDITH J
Address	6603 OLD BAAGDAD HWY
City-State-Zip:	MILTON FL 32583

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: J KENNETH SMITH

MRMG

05/02/2013

Electronic Signature of Signing Authorized Person(s) Detail_____
Date