


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 02, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000029181</b>	
1. Entity Name EXECUTIVE TRANSPORT, LLC	

Principal Place of Business 3033 W. ODESSA RD. AVON PARK, FL 33825 US	Mailing Address 3033 W. ODESSA RD. AVON PARK, FL 33825 US
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DO NOT WRITE IN THIS SPACE



03302008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 72-1596339	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

LUDT, PERRY E  
 3033 W. ODESSA RD.  
 AVON PARK, FL 33825

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! - FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LUDT, PERRY E 3033 W. ODESSA RD. AVON PARK, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LUDT, MARIA 3033 W. ODESSA RD. AVON PARK, FL 33825
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U00000877308  
04/14/08-80033-010 138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Maria Ludt Date: 3-28-08 Daytime Phone #: 863-453-9251

MARIA Ludt