

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000002421

FILED
Apr 30, 2008
Secretary of State

Entity Name: ILLUMINATION LOGISTIC SERVICES LLC

Current Principal Place of Business:

22125 EAST LAKE LOOP
LAND O LAKES, FL 34639

New Principal Place of Business:

3104 BANYAN HILL LANE
LAND O LAKES, FL 34639

Current Mailing Address:

22125 EAST LAKE LOOP
LAND O LAKES, FL 34639

New Mailing Address:

P.O. BOX 7
LAND O LAKES, FL 34639

FEI Number: 01-0881462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENDRICK, THOMAS C
22125 EAST LAKE LOOP
LAND O LAKES, FL 34639 US

Name and Address of New Registered Agent:

WILLIAMS, KRISTIE A
4207 VERNE COURT
LAND O LAKES, FL 34639 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: KRISTIE A. WILLIAMS

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KENDRICK, THOMAS C
Address: 22125 EAST LAKE LOOP
City-St-Zip: LAND O LAKES, FL 34639

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WILLIAMS, KRISTIE A
Address: 4207 VERNE COURT
City-St-Zip: LAND O LAKES, FL 34639

Title: GMM () Change (X) Addition
Name: HINST, DONALD R
Address: 3104 BANYAN HILL LANE
City-St-Zip: LAND O LAKES, FL 34639

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: KRISTIE A. WILLIAMS

MGRM

04/30/2008

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