2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000006415

Entity Name: A.C.T. ENTERPRISES, LLC

FILED Apr 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15047 ALTMAN ROAD 11190 M J ROAD

MYAKKA CITY, FL 34251 MYAKKA CITY, FL 34251

Current Mailing Address: New Mailing Address:

P.O. BOX 277 11190 M J RD

MYAKKA CITY, FL 34251 MYAKKA CITY, FL 34251

FEI Number: 65-1019324 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BARNES, GARRET T ESQ 3119 MANATEE AVE WEST BRADENTON, FL 34205 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

ADDITIONS/CHANGES:

Electronic dignatare of registered rigent

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MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete Title: () Change () Addition

 Name:
 ANSON, BARBARA
 Name:

 Address:
 P.O. BOX 277
 Address:

 City-St-Zip:
 MYAKKA CITY, FL 34251
 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 CISLO, ALICE
 Name:
 CISLO, ALICE

 Address:
 15047 ALTMAN ROAD
 Address:
 11190 M J ROAD

 City-St-Zip:
 MYAKKA CITY, FL 34251
 City-St-Zip:
 MYAKKA CITY, FL 34251

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: ALICE CISLO MANA 04/14/2008