

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000016275

Entity Name: PLUG SOURCE, LLC

FILED
Jan 06, 2004
Secretary of State

Current Principal Place of Business:

4050 BRITT RD
MOUNT DORA, FL 32757

New Principal Place of Business:

4110 BRITT RD
MOUNT DORA, FL 32757

Current Mailing Address:

4050 BRITT RD
MOUNT DORA, FL 32757

New Mailing Address:

4110 BRITT RD
MOUNT DORA, FL 32757

FEI Number: 65-0436082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARVE, ASHISH
4050 BRITT RD
MOUNT DORA, FL 32757 US

Name and Address of New Registered Agent:

KARVE, ASHISH
33435 EAST LAKE JOANNA DRIVE
EUSTIS, FL 32736 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: ASHISH KARVE

01/06/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: P () Delete
Name: KARVE, ASHISH N
Address: 4050 BRITT RD.
City-St-Zip: MOUNT DORA, FL 32757

Title: VP () Delete
Name: KARVE, CHAITRALI A
Address: 4050 BRITT RD.
City-St-Zip: MOUNT DORA, FL 32757

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KARVE, ASHISH N
Address: 33435 EAST LAKE JOANNA DRIVE
City-St-Zip: EUSTIS, FL 32736

Title: MGRM (X) Change () Addition
Name: KARVE, CHAITRALI A
Address: 33435 EAST LAKE JOANNA DRIVE
City-St-Zip: EUSTIS, FL 32736

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ASHISH KARVE

MGRM

01/06/2004

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