

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000016531

Entity Name: IDGAS, L.L.C.

FILED
May 30, 2006
Secretary of State

Current Principal Place of Business:

PO BOX 25177
TAMPA, FL 336225177

New Principal Place of Business:

Current Mailing Address:

PO BOX 25177
TAMPA, FL 336225177

New Mailing Address:

FEI Number: 59-3746892 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RIVERO, CESAR J
2203 N. LOIS AVE. #700
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CAMPO, JOAQUIN M
Address: 3301 CHEVIOT DR.
City-St-Zip: TAMPA, FL 33618

Title: MGRM () Delete
Name: ODOM, ROBERT
Address: 2510 PEMBERTON DR
City-St-Zip: SESSNER, FL 33584

Title: MGR () Delete
Name: RIVERO, CESAR J
Address: 19020 GULF BLVD. #5
City-St-Zip: INDIAN SHORES, FL 33785

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CESAR J RIVERO

MAN

05/30/2006

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