2007 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Jan 11, 2007 8:00 am Secretary of State **DOCUMENT # L02000008780** 01-11-2007 90129 029 ****55.00 YBOR ENGINEERING, LLC Principal Place of Business Mailing Address 8011 LAND O' LAKES BLVD. 8011 LAND O' LAKES BLVD. 20000696 LAND O' LAKES, FL 34639 LAND O' LAKES, FL 34639 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092007 Chg-LLC CR2E083 (12/06) City & State City & State 4. FEI Number Applied For 56-2361716 Not Applicable Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARQUARDT, J. MATTHEW <u>KEVIN BOHNE</u> Street Address (P.O. Box Number is Not Acceptable) 8011 LAND O LAKES BLVD. 625 COURT STREET, SUITE 200 CLEARWATER, FL 33756 LAND O' LAKES 34638 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. **JANUARY 9, 2007** KEVIN BOHNE, PRESIDENT SIGNATURE me of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES **MGRM** TITLE Delete MLE ☐ Change ☐ Addition BOHNE, KEVIN NAME NAME STREET ADDRESS 8011 LAND O' LAKES BLVD. STREET ADDRESS LAND O' LAKES, FL 34639 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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 truestee empowered to execute this report as required by Chapter 608, Florida Statutes.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

SIGNATURE: KEVIN BOHNE, PRESIDENT JANUARY 9, 2007
SIGNATURE AND TYPEU OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE
Date

☐ Delete

(813) 996-0019

☐ Change

■ Addition