

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008979

Entity Name: ECAC, LTD. CO.

FILED
May 03, 2010
Secretary of State

Current Principal Place of Business:

931 N. STATE ROAD 434, SUITE 1201-59
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

380 S. STATE ROAD 434, SUITE 1004-159
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

931 N. STATE ROAD 434, SUITE 1201-59
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

380 S. STATE ROAD 434, SUITE 1004-159
ALTAMONTE SPRINGS, FL 32714

FEI Number: 02-0580313 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:

MOONS, TERRENCE J
931 N. STATE ROAD 434, SUITE 1201-59
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

MOONS, TERRENCE J
380 S. STATE ROAD 434, SUITE 1004-159
ALTAMONTE SPRINGS, FL 32714 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

05/03/2010

Date

MANAGING MEMBERS/MANAGERS:

Title: CEO
Name: MOONS, TERRENCE J
Address: 380 S. STATE ROAD 434, SUITE 1004-159
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby 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: TERRENCE J. MOONS

CEO

05/03/2010

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