

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009655

Entity Name: MAGNOLIA ENERGY, L.L.C.

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

9000 SHERIDAN STREET, #130
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

9000 SHERIDAN STREET, #130
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 51-0448572

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEUTSCH, STEVEN W ESQ
C/O FRANK, WEINBERG & BLACK, P.L.
7805 S.W 6TH COURT
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

STEVEN W. DEUTSCH, ESQ.
FRANK, WEINBERG & BLACK, P.L.
7805 S.W 6TH COURT
PLANTATION, FL 33324 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: STEVEN W. DEUTSCH, ESQ.

01/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CRUZ, TERESA
Address: 9000 SHERIDAN ST., SUITE 130
City-St-Zip: PEMBROKE PINES, FL 33024

Title: MGRM () Delete
Name: ZINN, MARION
Address: 8841 N. LAKE DASHA DRIVE
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: CRUZ,, CLEMENTE
Address: 9000 SHERIDAN ST., SUITE 130
City-St-Zip: PEMBROKE PINES, FL 33024

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: CLEMENTE CRUZ

MRGM

01/15/2009

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