2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011960

Entity Name: PROFESSIONAL CONVEYOR SOUTH, LLC

FILED Feb 16, 2011 Secretary of State

US

Current Principal Place of Business: New Principal Place of Business:

2886 LANDYN'S CIRCLE 480 STARBOARD LANDING FERNANDINA BEACH, FL 32034 FERNANDINA BEACH, FL 32034

Current Mailing Address: New Mailing Address:

P.O. BOX 15611

FERNANDINA BEACH, FL 32035

FEI Number: 02-0602985 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WIELAND, TRACY J
2886 LANDYN'S CIRCLE
WIELAND, TRACY J
480 STARBOARD LANDING

FERNANDINA BEACH, FL 32034 US FERNANDINA BEACH, FL 32034

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: 02/16/2011

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM

Name: WIELAND, TRACY J
Address: 480 STARBOARD LANDING
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: MGRM

Name: WIELAND, TRACY J
Address: 480 STARBOARD LANDING
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM

Name: WIELAND, TRACY J
Address: 480 STARBOARD LANDING
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Title: MGRM

Name: WIELAND, TRACY J
Address: 480 STARBOARD LANDING
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM

Name: WIELAND153, TRACY J
Address: 480 STARBOARD LANDING
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM

Name: WIELAND, TRACY J
Address: 480 STARBOARD LANDING
City-St-Zip: FERNANDINA BEACH, FL 32034

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 Statues.

SIGNATURE: TRACY J. WIELAND PRES 02/16/2011

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