2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021266

Entity Name: QCE, L.L.C.

Current Principal Place of Business:	**New Principal Place of Business:**
3013 DEL PRADO BLVD. UNIT #13 CAPE CORAL, FL 33904	

Current Mailing Address:	**New Mailing Address:**
3013 DEL PRADO BLVD. UNIT #13 CAPE CORAL, FL 33904	

FEI Number: 51-0420429   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:**
ALLEN, GLENN A 3013 DEL PRADO BLVD., UNIT #13 CAPE CORAL, FL 33904 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   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGR ( ) Delete	Title:	( ) Change ( ) Addition
Name:	HISLOP, JOHN	Name:	
Address:	3013 DEL PRADO BLVD. UNIT #13	Address:	
City-St-Zip:	CAPE CORAL, FL 33904	City-St-Zip:	

Title:	MGR ( ) Delete	Title:	( ) Change ( ) Addition
Name:	ADAMS, WARWICK	Name:	
Address:	3013 DEL PRADO BLVD. UNIT #13	Address:	
City-St-Zip:	CAPE CORAL, FL 33904	City-St-Zip:	

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	ALLEN, GLENN	Name:	
Address:	3013 DEL PRADO BLVD. UNIT #13	Address:	
City-St-Zip:	CAPE CORAL, FL 33904	City-St-Zip:	

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: GLENN ALLEN   COO   01/22/2008

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