

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000001417

FILED  
Feb 18, 2009  
Secretary of State

Entity Name: CONSOLIDATED ENVIRONMENTAL ENGINEERING, LLC

**Current Principal Place of Business:**

245 EAST DRIVE  
SUITE 103  
MELBOURNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

245 EAST DRIVE  
SUITE 103  
MELBOURNE, FL 32904

**New Mailing Address:**

FEI Number: 14-1862337

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SCOTT, TIM  
667 AUTUMN GLEN DR  
MELBOURNE, FL 32940 US

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

SCOTT, TIM  
339 LANSING ISLAND DRIVE  
SATELLITE BEACH, FL 32940 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:

02/18/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P ( ) Delete  
Name: SCOTT, TIM  
Address: 667 AUTUMN GLEN DR  
City-St-Zip: MELBOURNE, FL 32940

Title: VP ( ) Delete  
Name: SCOTT, LISA  
Address: 667 AUTUMN GLEN DR  
City-St-Zip: MELBOURNE, FL 32940

**ADDITIONS/CHANGES:**

Title: P (X) Change ( ) Addition  
Name: SCOTT, TIM  
Address: 339 LANSING ISLAND DIVE  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: VP (X) Change ( ) Addition  
Name: SCOTT, LISA  
Address: 339 LANSING ISLAND DIVE  
City-St-Zip: SATELLITE BEACH, FL 32937

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: LISA SCOTT

VP

02/18/2009

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