

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047412

Entity Name: SEMINOLE SPLICING LLC

FILED
Jan 08, 2009
Secretary of State

Current Principal Place of Business:

New Principal Place of Business:

324 OLD MAGNOLIA RD.
CRAWFORDVILLE, FL 32327

Current Mailing Address:

New Mailing Address:

324 OLD MAGNOLIA RD.
CRAWFORDVILLE, FL 32327

FEI Number: 75-3137894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLOUNT, SAM
324 OLD MAGNOLIA RD.
CRAWFORDVILLE, FL 32327 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:

Title: MGRM () Delete
Name: BLOUNT, SAM
Address: 324 OLD MAGNOLIA RD.
City-St-Zip: CRAWFORDVILLE, FL 32327

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
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: SAM BLOUNT

MGRM

01/08/2009

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