

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000053345

FILED
Jul 10, 2007
Secretary of State

Entity Name: BETTS LLC

Current Principal Place of Business:

2640 WOOD POINTE DRIVE
HOLIDAY, FL 34691

New Principal Place of Business:

20308 LACE CASCADE RD
LAND O LAKES, FL 34637

Current Mailing Address:

2640 WOOD POINTE DRIVE
HOLIDAY, FL 34691

New Mailing Address:

20308 LACE CASCADE RD
LAND O LAKES, FL 34637

FEI Number: 83-0379641 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MASTRODONATO, RON
2640 WOOD POINTE DRIVE
HOLIDAY, FL 34691 US

Name and Address of New Registered Agent:

MASTRODONATO, RON
20308 LACE CASCADE RD
LAND O LAKES, FL 34637 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:

07/10/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MASTRODONATO, RON
Address: 2640 WOOD POINTE DRIVE
City-St-Zip: HOLIDAY, FL 34691

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MASTRODONATO, RON
Address: 20308 LACE CASCADE RD
City-St-Zip: LAND O LAKES, FL 34637

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: RON MASTRODONATO

MGRM

07/10/2007

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