

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
05 APR 18 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # L04000014290
1. Entity Name
OIL FOR AMERICA, LLC

Principal Place of Business 7268 BLOUNTSTOWN HIGHWAY TALLAHASSEE, FL 32310	Mailing Address 7268 BLOUNTSTOWN HIGHWAY TALLAHASSEE, FL 32310
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03072005 Chg-LLC CR2E083 (10/03)

4. FEI Number 20-0765892	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
ANGERER, ROBERT J SR
7268 BLOUNTSTOWN HIGHWAY
TALLAHASSEE, FL 32310

BJR

7. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ANGERER, ROBERT J SR. 7268 BLOUNTSTOWN HIGHWAY TALLAHASSEE, FL 32310 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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04/20/05--01044--016 **50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Robert J. Angerer, Sr. Date: 4/15/05 Daytime Phone #: 850-574-5982

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE