

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029316

FILED
May 01, 2006
Secretary of State

Entity Name: ETHANOL FUELS OF FLORIDA, L.L.C.

Current Principal Place of Business:

9101 EAST BAY HARBOR DRIVE #305
BAY HARBOR ISLANDS, FL 33154

New Principal Place of Business:

Current Mailing Address:

9101 EAST BAY HARBOR DRIVE #305
BAY HARBOR ISLANDS, FL 33154

New Mailing Address:

FEI Number: ☐ **FEI Number Applied For (X)** ☐ **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:

Name and Address of New Registered Agent:

EVANS, PETER MARK
9101 EAST BAY HARBOR DRIVE #305
BAY HARBOR ISLANDS, FL 33154 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: EVANS, PETER MARK
Address: 9101 EAST BAY HARBOR DRIVE #305
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: MGRM () Delete
Name: MCMAHON, GEORGE
Address: 9101 EAST BAY HARBOR DRIVE #101
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PETER M EVANS

MGRM

05/01/2006

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