

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 03, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # L04000032776

1. Entity Name  
MAKING IT CLEAN, LLC



Principal Place of Business  
16594 SE 160TH AVENUE ROAD  
WEIRSDALE, FL 32195 US

Mailing Address  
16594 SE 160TH AVENUE ROAD  
WEIRSDALE, FL 32195 US



03212007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 33-1091015	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RYAN, MICHAEL M  
16594 SE 160TH AVENUE ROAD  
WEIRSDALE, FL 32195

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2007**

U00000760089  
05/24/07-80068-015 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RYAN, WENDY M 16600 SE 160TH AVENUE ROAD WEIRSDALE, FL 32195
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RYAN, MICHAEL M 16594 SE 16TH AVE ROAD WEIRSDALE, FL 32195
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: ✓ *Michael M. Ryan*

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

✓ 4/4/07

Date

✓ 352 821 0716

Daytime Phone #