

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000044199

Entity Name: E & C SOLUTIONS, LLC

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

12406 WINDSWEPT AVENUE
RIVERVIEW, FL 33569

New Principal Place of Business:

448 BRIDGEVIEW TER.
JACKSONVILLE, FL 32259

Current Mailing Address:

12406 WINDSWEPT AVENUE
RIVERVIEW, FL 33569

New Mailing Address:

448 BRIDGEVIEW TER.
JACKSONVILLE, FL 32259

FEI Number: 84-1646295

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELIARD, ERNST
12406 WINDSWEPT AVENUE
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

BELIARD, ERNST
448 BRIDGEVIEW TER.
JACKSONVILLE, FL 32259 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:

03/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BELIARD, CAMILLE V
Address: 12406 WINDSWEPT AVENUE
City-St-Zip: RIVERVIEW, FL 33569

Title: MGRM () Delete
Name: BELIARD, ERNST
Address: 12406 WINDSWEPT AVENUE
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BELIARD, CAMILLE V
Address: 448 BRIDGEVIEW TER.
City-St-Zip: JACKSONVILLE, FL 32259

Title: MGRM (X) Change () Addition
Name: BELIARD, ERNST
Address: 448 BRIDGEVIEW TER.
City-St-Zip: JACKSONVILLE, FL 32259

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: ERNST BELIARD

MGRM

03/20/2009

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