

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048419

FILED
Apr 28, 2008
Secretary of State

Entity Name: E4, LLC

Current Principal Place of Business:

6176 HALF MOON DRIVE
PORT ORANGE, FL 32127 US

New Principal Place of Business:

Current Mailing Address:

6176 HALF MOON DRIVE
PORT ORANGE, FL 32127 US

New Mailing Address:

FEI Number: 20-1298588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIEBIS, DANIEL S
3890 TURTLE CREEK DRIVE
SUITE B
PORT ORANGE, FL 32127 US

Name and Address of New Registered Agent:

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: MGR () Delete
Name: LAYMAN, STUART J
Address: 6176 HALF MOON DRIVE
City-St-Zip: PORT ORANGE, FL 32127 US

Title: MGR () Delete
Name: LAYMAN, MARY E
Address: 6176 HALF MOON DRIVE
City-St-Zip: PORT ORANGE, FL 32127 US

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 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: MARY E LAYMAN

MGR

04/28/2008

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