2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 17, 2005
Secretary of State

DOCUMENT# L04000054156

Entity Name: MOCON, LLC

Current Principal Place of Business:

1501 S. FLAGLER DRIVE
WEST PALM BEACH, FL 33401

New Principal Place of Business:

1 CREEKWOOD DR
TEXARKANA, AK 71854

Current Mailing Address:

1501 S. FLAGLER DRIVE
WEST PALM BEACH, FL 33401

New Mailing Address:

1 CREEKWOOD DR
TEXARKANA, AK 71854

FEI Number: 27-0112479 **FEI Number Applied For ( )** **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:

DICKENSON, BLAINE C
712 U.S. HIGHWAY ONE, SUITE 400
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

NORRIS, DAVID B
712 U.S. HIGHWAY ONE, SUITE 400
NORTH PALM BEACH, FL 33408 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: DAVID B. NORRIS 05/17/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: GREEN, FRANK
Address: 1501 S. FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: WOODBRIDGE TRUST,
Address: 1 CREEKWOOD DR
City-St-Zip: TEXARKANA, AK 71854

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHNNY RAY ARNOLD MGRM 05/17/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date