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FILED
Jan 09, 2008
Secretary of State

5960 48TH ST E
BRADENTON, FL 34203

3211 42ND AVE E
BRADENTON, FL 34208

P.O. BOX 897
ONECO, FL 34264

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.

Electronic Signature of Registered Agent

Date _____

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WOLFGANG, J GOETZ
Address: P.O. BOX 897
City-St-Zip: ONECO, FL 34264

ADDITIONS/CHANGES:

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: WOLFGANG J GOETZ

MGR

01/09/2008

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