## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L04000076711**

1. Entity Name STEVEN WOERTZ SITE PREPARATION: LLC



FILED Feb 25, 2008 08:00 AN Secretary of State

Principal Place of Business 330 WASHINGTON BLVD. LAKE PLACID, FL 33852

Mailing Address

330 WASHINGTON BLVD. LAKE PLACID, FL 33852





02142008 No Chg-LLC CR2E083 (12/07)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

WORETŻ, STEVEN 330 WASHINGTON BLVD. LAKE PLACID, FL 33852

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8.	The above named entity submits this statement for the purpose of changing its registered office or re-	egistered agent, o	or both, in the S	tate of Florida.	am familiar with, a	nd 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

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000839128 - 03/05/08-80053-008 138,75

9. MANAGING MEMBERS/MANAGERS TITLE MGRM WOERTZ, STEVEN STREET ADDRESS 330 WASHINGTON BLVD. CATY-ST-7/P LAKE PLACID, FL 33852 TITLE NAME STREET ADDRESS CiTY-ST-ZIP DILE STREET ADORESS CITY-ST-ZIP THILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CATY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

02/28/08-80016-018 150.00

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11. I hereby certify that the information supplied with this filling 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: Stewn & Process

2/18/08 (863) 441-3439