2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2008
Secretary of State

DOCUMENT# L05000022290

Entity Name: ANDREWS INTERNATIONAL, LLC

Current Principal Place of Business:

1020 JILLIAM WAY
WINTER GARDEN, FL 34787 US

New Principal Place of Business:

15838 ARABIAN WAY
MONTVERDE, FL 34756 US

Current Mailing Address:

1020 JILLIAM WAY
WINTER GARDEN, FL 34787 US

New Mailing Address:

15838 ARABIAN WAY
MONTVERDE, FL 34756 US

FEI Number: 20-2881520 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDREWS, DEREK
1020 JILLIAM WAY
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

ANDREWS, DEREK
15838 ARABIAN WAY
MONTVERDE, FL 34756 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: DEREK ANDREWS 01/09/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ANDREWS, DEREK
Address: 1020 JILLIAM WAY
City-St-Zip: ORLANDO, FL 34787 US

Title: MGRM ( ) Delete
Name: ANDREWS, JANE M
Address: 1020 JILLIAM WAY
City-St-Zip: ORLANDO, FL 34787 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: ANDREWS, DEREK
Address: 15838 ARABIAN WAY
City-St-Zip: ORLANDO, FL 34756 US

Title: MGRM (X) Change ( ) Addition
Name: ANDREWS, JANE M
Address: 15838 ARABIAN WAY
City-St-Zip: ORLANDO, FL 34756 US

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: DEREK ANDREWS MGR 01/09/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date