

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000038881

FILED
Apr 30, 2007
Secretary of State

Entity Name: SUSTAINABLE STRUCTURES LEASING, LLC

Current Principal Place of Business:

8427 SOUTH PARK CIRCLE
SUITE 150
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

8427 SOUTH PARK CIRCLE
SUITE 150
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 20-2995479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAWKINS, MICHAEL W
1900 S HARBOR CITY BLVD.
SUITE 315
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

AVANTE HOLDING GROUP, INC.
2910 BUSH DR
MELBOURNE, FL 32935 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: MICHAEL W HAWKINS

04/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: SORCI, JOSEPH J
Address: 8427 S PARK CIRCLE, STE. 150
City-St-Zip: ORLANDO, FL 32819

Title: VP () Delete
Name: HAWKINS, MICHAEL W
Address: 8427 S PARK CIRCLE, STE. 150
City-St-Zip: ORLANDO, FL 32819

Title: CFO () Delete
Name: HARMON, BRUCE
Address: 8427 S PARK CIRCLE, STE. 150
City-St-Zip: ORLANDO, FL 32819

Title: COO () Delete
Name: BENNETT, GINA
Address: 8427 S PARK CIRCLE, STE. 150
City-St-Zip: ORLANDO, FL 32819

Title: CS () Delete
Name: GERKE, LEIGH
Address: 8427 SOUTH PARK CIRCLE
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HAWKINS, MICHAEL W
Address: 2910 BUSH DR
City-St-Zip: MELBOURNE, FL 32935

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: COO (X) Change () Addition
Name: BENNETT, GINA
Address: 2910 BUSH DR
City-St-Zip: MELBOURNE, FL 32935

Title: CS (X) Change () Addition
Name: GERKE, LEIGH
Address: 2910 BUSH DR
City-St-Zip: MELBOURNE, FL 32935

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: JOSEPH J SORCI

P

04/30/2007

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