

FILED
Feb 19, 2008 8:00 am
Secretary of State

02-19-2008 90063 009 ***143.75

**LIABILITY COMPANY
 ANNUAL REPORT**

3057476



Mailing Address
 3241 NE HWY 349
 OLTOWA, FL 32680 US

60009142



WRITE IN THIS SPACE

0210006 No Cng-LLC CREBERS 11/2/07

4. FEI Number 18-1728498	Accepted For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

**DO NOT WRITE
 IN THIS SPACE**

BENSON, VICTOR P SR
 3241 NE HWY 349
 OLTOWA, FL 32680

1. The above named entity authenticates this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.

3. SIGNATURE
 Signature required for each officer or registered agent and each registered manager. (NOTE: Registered Agent Signature required when changing.) DATE

FILE NOW!!! FEE IS \$138.75
 After May 1, 2008 Fee will be \$158.75

B. MANAGING MEMBER(S) MANAGER(S)	
TITLE NAME SHEET ADDRESS CITY, ST, ZIP	MGR BENSON, VICTOR P SR 3241 NE HWY 349 OLTOWA, FL 32680
TITLE NAME SHEET ADDRESS CITY, ST, ZIP	MGR BENSON, DOROTHY J 3241 NE HWY 349 OLTOWA, FL 32680
TITLE NAME SHEET ADDRESS CITY, ST, ZIP	
TITLE NAME SHEET ADDRESS CITY, ST, ZIP	
TITLE NAME SHEET ADDRESS CITY, ST, ZIP	

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 IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature will 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 indicated by Chapter 606, Florida Statutes.

SIGNATURE: *Dorothy J Benson* 2-11-08 353-444-0738

IMPORTANT INSTRUCTIONS

- Make check payable to Florida Department of State.
 Check must be payable in United States Funds and through a United States Bank.
- Submit report with a separate check for each filing.
- The fee to file the Limited Liability Company annual report is \$138.75. If a certificate of status is desired, please add an additional \$5.00. Only one certificate may be requested.
- Certificates will be mailed to the entity's mailing address only.
- Sign report in block 11.

Mail completed report to:

Division of Corporations
 P.O. Box 6198
 Tallahassee, FL 32314
 Courier Address: (overnight delivery)
 Division of Corporations
 Clifton Building
 2861 Executive Center Circle
 Tallahassee, FL 32301

Questions?

Phone: (850) 245-6051
 Hearing/Voice Impaired may call (850) 245-6096 (TDD)

INFORMATION REGARDING RETURNED CHECK

If the check submitted with this report is returned by a bank for any reason, the report will be cancelled and considered not filed. The Department of State will disburse the entity if a replacement payment with service charge and report are not resubmitted within the prescribed time frame.