

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000118759

FILED
Feb 06, 2007
Secretary of State

Entity Name: CP-1, LLC

Current Principal Place of Business:

17294 WOOD DRIFT DRIVE
WEST OLIVE, MI 49460 US

New Principal Place of Business:

4257 SW HIGH MEADOW AVE
PALM CITY, FL 34990 US

Current Mailing Address:

17294 WOOD DRIFT DRIVE
WEST OLIVE, MI 49460 US

New Mailing Address:

4257 SW HIGH MEADOW AVE
PALM CITY, FL 34990 US

FEI Number: 20-3973029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUIST, CHAD D
C/O 2416 N. DIXIE HIGHWAY
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

QUIST, CHAD D CHAD QU
4257 SW HIGH MEADOW AVE
PALM CITY, FL 34990 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: CHAD QUIST

02/06/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: QUIST, CHAD D
Address: 17294 WOOD DRIFT DRIVE
City-St-Zip: WEST OLIVE, MI 49460 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: QUIST, CHAD D CHAD QU
Address: 4257 SW HIGH MEADOW AVE
City-St-Zip: PALM CITY, FL 34990 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CHAD QUIST

MGR

02/06/2007

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