

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122149

Entity Name: SCENTWRAP, LLC

FILED
Jan 14, 2007
Secretary of State

Current Principal Place of Business:

346 EVANSDALE ROAD
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

346 EVANSDALE ROAD
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 74-3156273

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEMP, M. CLIFF
346 EVANSDALE ROAD
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KEMP, M. CLIFF
Address: 346 EVANSDALE ROAD
City-St-Zip: LAKE MARY, FL 32746

Title: MGR () Delete
Name: SHAPIRO, STEVEN I
Address: 440 PICKFAIR TERRACE
City-St-Zip: LAKE MARY, FL 32746

Title: MGR () Delete
Name: RENO, RANDALL L
Address: 350 TERRACE DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: MGR () Delete
Name: METCALF, PATRICK O
Address: 1058 BIG OAKS BLVD.
City-St-Zip: OVIEDO, FL 32765

Title: MGR () Delete
Name: SLOAN, FRANK V
Address: 510 KELLY GREEN ST.
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES:

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

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

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

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

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

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: CLIFF KEMP

MGR

01/14/2007

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