

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000021334

Entity Name: ET, LLC

FILED  
Jul 09, 2008  
Secretary of State

**Current Principal Place of Business:**

17454 SOUTH HIGHWAY 475  
SUMMERFIELD, FL 34491

**New Principal Place of Business:**

13938 S HWY 441  
SUMMERFIELD, FL 34491

**Current Mailing Address:**

P.O. BOX 770  
SUMMERFIELD, FL 34492

**New Mailing Address:**

13938 S HWY 441  
SUMMERFIELD, FL 34491

FEI Number: 20-4386900

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAVILA, JOSE R  
17454 SOUTH HIGHWAY 475  
SUMMERFIELD, FL 34491 US

**Name and Address of New Registered Agent:**

DAVILA, JOSE R  
13938 S HWY 441  
SUMMERFIELD, FL 34491 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: JOSE R DAVILA

07/09/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: DR. ( ) Delete  
Name: RAMIREZ, FRANCES M  
Address: 17454 S HWY 475  
City-St-Zip: SUMMERFIELD, FL 34491

**ADDITIONS/CHANGES:**

Title: DR. (X) Change ( ) Addition  
Name: RAMIREZ, FRANCES M  
Address: 13938 S HWY 441  
City-St-Zip: SUMMERFIELD, FL 34491

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: FRANCES M. RAMIREZ

DR.

07/09/2008

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