


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 17, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000035435

1. Entity Name
SAVE-N-ENERGY.COM, LLC



Principal Place of Business 15475 93RD STREET NORTH WEST PALM BEACH, FL 33412 US	Mailing Address 15475 93RD STREET NORTH WEST PALM BEACH, FL 33412 US
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DO NOT WRITE IN THIS SPACE



01082008No Chg-LLC CR2E083 (12/07)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**SAUERBERG, ERIC M
 200 VILLAGE SQUARE CROSSING
 SUITE 102
 PALM BEACH GARDENS, FL 33410**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000788115
 01/18/08-80027-014 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SUMMERSILL, JEFFREY 15475 93RD STREET NORTH WEST PALM BEACH, FL 33412
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SUMMERSILL, MELISSA 15475 93RD STREET NORTH WEST PALM BEACH, FL 33412
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Melissa Summersill* **Melissa Summersill** 1-15-08 561 7534930

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #