2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# L06000065584

Entity Name: C3 LLC

Current Principal Place of Business:

235 6TH STREET, N.W.
SUITE 607
WINTER HAVEN, FL 33881

New Principal Place of Business:

Current Mailing Address:

235 6TH STREET, N.W.
SUITE 607
WINTER HAVEN, FL 33881

New Mailing Address:

FEI Number: 20-5491805 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JANTOMASO, CYNTHIA A
235 6TH STREET, N.W.
SUITE 607
WINTER HAVEN, FL 33881 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:	MGR	( ) Delete
Name:	JANTOMASO, CYNTHIA A	
Address:	235 6TH STREET, N.W. SUITE 607	
City-St-Zip:	WINTER HAVEN, FL 33881	
Title:	MGRM	( ) Delete
Name:	JANTOMASO, JOHN J	
Address:	235 6TH STREET, N.W. SUITE 607	
City-St-Zip:	WINTER HAVEN, FL 33881	
Title:	MGRM	( ) Delete
Name:	SHORT, MATTHEW J	
Address:	235 6TH STREET, N.W. SUITE 607	
City-St-Zip:	WINTER HAVEN, FL 33881	

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:	

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: CYNTHIA JANTOMASO MGR 04/17/2009

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