

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000065950

FILED
Feb 18, 2008
Secretary of State

Entity Name: LWA GREATER MONTANA BIO ENERGIES, LLC

Current Principal Place of Business:

3722 NE 199TH STREET
MIAMI, FL 33180

New Principal Place of Business:

18851 NE 29TH AVENUE
7TH FLOOR
AVENTURA, FL 33180

Current Mailing Address:

3722 NE 199TH STREET
MIAMI, FL 33180

New Mailing Address:

20533 BISCAYNE BLVD
SUITE 409
AVENTURA, FL 33180

FEI Number: 20-5772441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GERTZ, CHRISTOPHER J ESQ.
1100 SE 11TH COURT
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

LANKRY, AARON
18851 NE 29TH AVENUE
7TH FLOOR
AVENTURA, FL 33180 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: AARON LANKRY

02/18/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WAXMAN, DAVID
Address: 20883 NE 32ND AVE
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete
Name: LANKRY, AARON
Address: 19275 MYSTIC POINT DRIVE
City-St-Zip: AVENTURA, FL 33180

Title: MGRM (X) Delete
Name: ELHARAR, MORIA
Address: 3722 NE 199TH STREET
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: LANKRY, AARON
Address: 18851 NE 29TH AVENUE 7TH FLOOR
City-St-Zip: AVENTURA, FL 33180

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: AARON LANKRY

MGRM

02/18/2008

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