

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000072122

Entity Name: WELTRAX, LLC

**FILED**  
**Feb 19, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

11462 ARBORSIDE BEND WAY  
WINDERMERE, FL 34786

**New Principal Place of Business:**

**Current Mailing Address:**

11462 ARBORSIDE BEND WAY  
WINDERMERE, FL 34786

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

DUNEGAN, STEPHEN D ESQ.  
C/O DEAN MEAD  
800 N. MAGNOLIA AVENUE  
ORLANDO, FL 32803 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: DUNGEGAN, JACQUE  
Address: 11462 ARBORSIDE BEND WAY  
City-St-Zip: WINDERMERE, FL 34786

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DUNGEGAN, JACQUE D  
Address: 11462 ARBORSIDE BEND WAY  
City-St-Zip: WINDERMERE, FL 34786

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: JACQUE D DUNEGAN

MGRM

02/19/2007

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