2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2009
Secretary of State

DOCUMENT# L06000082524

Entity Name: GREENLITE, LLC

Current Principal Place of Business:

3435 S. HIGHLANDS AVE.
SEBRING, FL 33870 US

New Principal Place of Business:

2373 US HWY 27 SOUTH
SEBRING, FL 33870 US

Current Mailing Address:

3435 S. HIGHLANDS AVE.
SEBRING, FL 33870 US

New Mailing Address:

2373 US HWY 27 SOUTH
SEBRING, FL 33870 US

FEI Number: 26-2347555 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEE, KEVIN K
3435 S. HIGHLANDS AVE.
SEBRING, FL 33870 US

Name and Address of New Registered Agent:

LEE, KEVIN K
2373 US HWY 27 SOUTH
SEBRING, FL 33870 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: KEVIN K LEE 03/06/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: LEE, KEVIN K
Address: 3435 S. HIGHLANDS AVE.
City-St-Zip: SEBRING, FL 33870 US

Title: MGR ( ) Delete
Name: LEE, SWAN
Address: 3435 S. HIGHLANDS AVE.
City-St-Zip: SEBRING, FL 33870

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: LEE, KEVIN K
Address: 2373 US HWY 27 SOUTH
City-St-Zip: SEBRING, FL 33870 US

Title: MGR (X) Change ( ) Addition
Name: LEE, SWAN
Address: 2373 US HWY 27 SOUTH
City-St-Zip: SEBRING, FL 33870 US

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: SWAN LEE MGR 03/06/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date