

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000084289

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** MOUNTAIN REMOVAL GROUP, LLC

**Current Principal Place of Business:**

8539 GATE PARKWAY WEST NO. 1537  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

8539 GATE PARKWAY WEST NO. 1537  
JACKSONVILLE, FL 32216

**New Mailing Address:**

FEI Number: 36-4627547      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

ENGLISH, E WILLIAM  
830 ELK RUN  
JACKSONVILLE, FL 32259      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: ENGLISH, ERIK W  
Address: 830 ELK RUN  
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: MGR      ( ) Delete  
Name: BURKE, JARED  
Address: 3205 HERSCHEL STREET NO. 2  
City-St-Zip: JACKSONVILLE, FL 32205

**ADDITIONS/CHANGES:**

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: ERIK ENGLISH

MGR

05/01/2009

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