

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000095938

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: FLORIDA OIL RECLAIMING LLC

**Current Principal Place of Business:**

2403 FINLANDIA LANE  
SUITE # 11  
CLEARWATER, FL 33763

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7031  
CLEARWATER, FL 33758

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLIAMS, LYLE A  
2403 FINLANDIA LN  
SUITE # 11  
CLEARWATER, FL 33763 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: WILLIAMS, LYLE A  
Address: 2403 FINLANDIA LN # 11  
City-St-Zip: CLEARWATER, FL 33763

Title: MGRM ( ) Delete  
Name: ROBERT, PHILLIPS K  
Address: 222 GRAND VISTA DR  
City-St-Zip: BEAVERCREEK, OH 45440

**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: LYLE A WILLIAMS

MGR

04/27/2007

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