

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000100357

FILED
Jul 23, 2007
Secretary of State

Entity Name: MORGAN ELECTRIC SOUTHEAST, LLC

Current Principal Place of Business:

4661 JOHNSON ROAD
SUITE 14
COCONUT CREEK, FL 33073 US

New Principal Place of Business:

5807 NORTH ANDREWS WAY
FORT LAUDERDALE, FL 33309 US

Current Mailing Address:

4661 JOHNSON ROAD
SUITE 14
COCONUT CREEK, FL 33073 US

New Mailing Address:

5807 NORTH ANDREWS WAY
FORT LAUDERDALE, FL 33309 US

FEI Number: 20-5714230 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:

LANG, TIMOTHY J
4661 JOHNSON ROAD
SUITE 14
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

LANG, TIMOTHY J
5807 NORTH ANDREWS WAY
FORT LAUDERDALE, FL 33309 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:

07/23/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LANG, TIMOTHY J
Address: 4661 JOHNSON ROAD, SUITE 14
City-St-Zip: COCONUT CREEK, FL 33073 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LANG, TIMOTHY J
Address: 14362 WELLINGTON TRACE
City-St-Zip: WELLINGTON, FL 33414 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: TIMOTHY JAMES LANG

MGRM

07/23/2007

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