2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 08, 2008 08:00 A Secretary of State DOCUMENT # L06000110369~ MACBARNEY SPLICING, LLC Principal Place of Business Mailing Address 3408 LITTLE OAK STREET 3408 LITTLE OAK STREET VALRICO, FL 33594 VALRICO, FL 33594 01032008No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-8038408 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent MCCLUSKEY, MICHAEL C DO NOT WRITE 3408 LITTLE OAK STREET LITHIA, FL 33594 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/MANAGERS MGR TITLE MCCLUSKEY, MICHAEL C NAME U00000775512 01/08/08-80033-009 138.75 STREET ADDRESS 3408 LITTLE OAK STREET CITY-ST-ZIP VALRICO, FL 33594 MGR TITLE BARNES, DAVID NAME STREET ADDRESS 2838 N VALRICO ROAD CITY-ST-ZIP SEFFNER, FL 33584 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

TITLE NAME STREET ADDRESS CITY-ST-ZIP