2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000111564

1. Entity Name
ANDERS DANIELSON ENTERPRISES, LLC

Principal Place of Business	Mailing Address
653 LA SALLE DR	653 LA SALLE DR
ALTAMONTE SPRINGS, FL 32714	ALTAMONTE SPRINGS, FL 32714

DO NOT WRITE IN THIS SPACE

01042008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
NOT APPLICABLE	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

DANIELSON, ANDERS
653 LA SALLE DR
ALTAMONTE SPRINGS, FL 32714

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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_____
        Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	DANIELSON, ANDERS
STREET ADDRESS	653 LA SALLE DR
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32714

TITLE	
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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.

SIGNATURE: _____ ANDERS DANIELSON MGR   1/4/08   407-924-9956
        SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #