


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 15, 2007 8:00 am
Secretary of State

03-15-2007 90133 032 ****50.00

DOCUMENT # L06000117653 1. Entity Name NATIVE ENVIRONMENTAL SERVICES, LLC					
Principal Place of Business 3430 SUMMIT BLVD. PENSACOLA, FL 32503			Mailing Address 3430 SUMMIT BLVD. PENSACOLA, FL 32503		
2. Principal Place of Business - No P.O. Box # 4200 Spanish Trail Pl		3. Mailing Address PO Box 30102			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Pensacola, FL		City & State Pensacola, FL		4. FEI Number 20-8294417	
Zip 32504	Country USA	Zip 32503	Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent ORLANDO, HEATHER 3430 SUMMIT BLVD. PENSACOLA, FL 32503				7. Name and Address of New Registered Agent Name Orlando, Heather Street Address (P.O. Box Number is Not Acceptable) 4200 Spanish Trail Pl City Pensacola FL Zip Code 32504	
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 <u><i>Heather Orlando</i></u> DATE <u><i>3/13/07</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ORLANDO, HEATHER 3430 SUMMIT BLVD. PENSACOLA, FL 32503			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
MGRM Orlando, Heather 4200 Spanish Trail Pl Pensacola, FL 32504				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
(Empty rows for additional members or changes)					
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: <u><i>Heather Orlando Heather Orlando</i></u> <u><i>3/12/07</i></u> <u><i>850 748-4986</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					

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