

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118928

Entity Name: LIMO ACCESS GROUP, LLC

FILED
Jul 22, 2007
Secretary of State

Current Principal Place of Business:

473 SE SEABEEZE LANE
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

473 SE SEABEEZE LANE
PORT ST. LUCIE, FL 34983

New Mailing Address:

FEI Number: 20-5411112 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:

THOMAS, ESQ., WOODIE H III
1603 VISION DRIVE
PALM BEACH GARDENS, FL 33418 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: LAMBERT, JACK E JR.
Address: 473 SE SEABREEZE LANE
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: MGRM () Delete
Name: HONAKER, SHAWN
Address: 1924 BOSTON ROAD
City-St-Zip: BARDSTOWN, KY 40004

ADDITIONS/CHANGES:

Title: CEO (X) Change () Addition
Name: LAMBERT, JACK E JR.
Address: 473 SE SEABREEZE LANE
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: MGR (X) Change () Addition
Name: KERNS, KELLY L
Address: 473 SE SEABREEZE LANE
City-St-Zip: PORT ST LUCIE, FL 34983

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: JACK E LAMBERT, JR.

CEO

07/22/2007

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