## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000032307

Entity Name: REG PRODUCTS, LLC

Name:

Address:

City-St-Zip:

FILED Apr 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 14588 BIG BRUSH LANE 830-13 A1A N. SUITEE 343 JACKSONVILLE, FL 32258 PONTE VEDRA BEACH, FL 32082 **Current Mailing Address: New Mailing Address:** 14588 BIG BRUSH LANE 830-13 A1A N. SUITEE 343 PONTE VEDRA BEACH, FL 32082 JACKSONVILLE, FL 32258 FEI Number: 20-8724659 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CONTEGA BUSINESS SERVICES LLC CONTEGA BUSINESS SERVICES LLC 554 LOMAX STREET ONE INDEPENDENT DRIVE STE 1200 JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32204 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: CHRISTIAN COX PREJEAN, VP 04/30/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Delete ( ) Change (X) Addition LUEBKER, GARRET Name: Name: Address: Address: 830-13 A1A N. SUITEE 343 City-St-Zip: City-St-Zip: PONTE VEDRA BEACH, FL 32082 Title: Title: MGR ( ) Change (X) Addition ( ) Delete Name: Name: OLINGER, ROB Address: Address: 830-13 A1A N. SUITEE 343 City-St-Zip: City-St-Zip: PONTE VEDRA BEACH, FL 32082 Title: () Delete Title: MGR ( ) Change (X) Addition KILLGO, ERIC Name: Name: 830-13 A1A N. SUITEE 343 Address: Address: City-St-Zip: City-St-Zip: PONTE VEDRA BEACH, FL 32082 Title: () Delete Title: MGR ( ) Change (X) Addition

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.

Name:

Address:

City-St-Zip:

KANE, ROBIN

830-13 A1A N. SUITEE 343

PONTE VEDRA BEACH, FL 32082

SIGNATURE: GARRET LUEBKER MGR 04/30/2008