

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000040754

Entity Name: ZENERGY LLC

FILED  
Mar 07, 2008  
Secretary of State

**Current Principal Place of Business:**

632 LONG LAKE DRIVE  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 621535  
OVIEDO, FL 32762

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

HUSE, PATRICIA  
632 LONG LAKE DRIVE  
OVIEDO, FL 32765    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:                      MGRM                      ( ) Delete  
Name:                      HUSE, PATRICIA  
Address:                      632 LONG LAKE DRIVE  
City-St-Zip:                      OVIEDO, FL 32765

**ADDITIONS/CHANGES:**

Title:                      MM                      (X) Change ( ) Addition  
Name:                      PATRICIA S. HUSE, TR, USTEE UTD 12/1 3 /07  
Address:                      632 LONG LAKE DRIVE  
City-St-Zip:                      OVIEDO, FL 32765

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: PATRICIA S. HUSE                      MGR                      03/07/2008

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