2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2008
Secretary of State

DOCUMENT# L07000046746

Entity Name: ODC 1, LLC

Current Principal Place of Business:

247 NORTH COLLIER BOULEVARD
SUITE 202
MARCO ISLAND, FL 34145

New Principal Place of Business:

Current Mailing Address:

PO BOX 2056
MARCO ISLAND, FL 34146

New Mailing Address:

PO BOX 394
JOHNSTON, IA 50131 03

FEI Number: 20-8957262 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORRIS, WILLIAM G ESQ
247 N. COLLIER BLVD.
SUITE 202
MARCO ISLAND, FL 34145 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: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition
Name: HENNING, JEFFRY
Address: 5800 MERLE HAY ROAD STE 14
City-St-Zip: JOHNSTON, IA 50131

Title: T ( ) Change (X) Addition
Name: CHARLSON, JEFFERY E
Address: 5800 MERLE HAY ROAD STE 14
City-St-Zip: JOHNSTON, IA 50131

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: JEFFERY E CHARLSON T 03/28/2008

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