2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2008
Secretary of State

DOCUMENT# L07000054058

Entity Name: SCOOTER PRO, LLC.

Current Principal Place of Business:

551 ANASTASIA BLVD
SAINT AUGUSTINE, FL 32080 US

New Principal Place of Business:

Current Mailing Address:

24 MICKLER BLVD
ST. AUGUSTINE, FL 32080 US

New Mailing Address:

FEI Number: 20-8888452 **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:

HOMANN, JOSEPH
24 MICKLER BLVD
ST. AUGUSTINE, FL 32080 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:	HOMANN, JOSEPH	
Address:	24 MICKLER BLVD	
City-St-Zip:	ST. AUGUSTINE, FL 32080 US	
Title:	MGRM	( ) Delete
Name:	HOMANN, JAY	
Address:	986 CROTON RD	
City-St-Zip:	PITTSTOWN, NJ 08867 US	
Title:	MGRM	( ) Delete
Name:	MARTOCI, PHIL	
Address:	1802 LAKEEDGE DRIVE	
City-St-Zip:	MIDDLEBURG, FL 32068 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: JOSEPH HOMANN MGR 05/02/2008

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