

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008 4/**

FILED
May 15, 2008 8:00 am
Secretary of State

04-17-2008 90163 042 ***138.75

DOCUMENT # L07000066447 1. Entity Name SPECIAL PROJECTS TECHNOLOGY, LLC																													
Principal Place of Business 1650 MISTY PLATEAU TRAIL CLEARWATER FL 33765 US			Mailing Address 1650 MISTY PLATEAU TRAIL CLEARWATER FL 33765 US																										
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																											
City & State Zip Country		City & State Zip Country		4. FEI Number 26-0413354 Applied For Not Applicable																									
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent HEILIG, DONALD M JR. 1650 MISTY PLATEAU TRAIL CLEARWATER FL 33765																									
7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____				8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: (Signature of person or person's name of registered agent must be legible) DATE: _____																									
FILE NOW!!! FEE IS \$138.75 After May 1, 2008, Fee Will Be \$538.75 Make Check Payable to Florida Department of State																													
9. MANAGING MEMBERS / MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY - ST - ZIP </td> <td style="width: 70%; padding: 2px;"> MGR HEILIG, DONALD M JR. 1650 MISTY PLATEAU TRAIL CLEARWATER FL 33765 ☐ Delete </td> </tr> <tr><td style="height: 30px;"></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td></tr> </table> 10. ADDITIONS / CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY - ST - ZIP </td> <td style="width: 70%; padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr><td style="height: 30px;"></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td></tr> </table>						TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HEILIG, DONALD M JR. 1650 MISTY PLATEAU TRAIL CLEARWATER FL 33765 ☐ Delete											TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition										
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 62B, Florida Statutes. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE 31 MAR 08 727 729 3058 DATE Digital Print #																													