2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000076117

Entity Name: WEC SERVICES, LLC

FILED May 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

35332 WHISPERING PINES DR. ZEPHYRHILLS, FL 33541

Current Mailing Address: New Mailing Address:

P.O. BOX 3162 35332 WHISPERING PINES DR. ZEPHYRHILLS, FL 335393162 ZEPHYRHILLS, FL 33541

FEI Number: 26-0580465 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

STEVENS, CAROLE E STEVENS, JAMES J

3658 SO. CEDAR TERRACE 35332 WHISPERING PINES DR HOMOSASSA S, FL 34448 US ZEPHYRHILLS, FL 33541 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: JAMES STEVENS 05/01/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 STEVENS, JAMES J
 Name:

 Address:
 35332 WHISPERING PINES DR.
 Address:

 City-St-Zip:
 ZEPHYRHILLS, FL 33541
 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

 Name:
 STEVENS, R. JAMES
 Name:

 Address:
 35332 WHISPERING PINES DR.
 Address:

 City-St-Zip:
 ZEPHYRHILLS, FL 33541
 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: JAMES STEVENS MGR 05/01/2008