

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000082250

FILED
Feb 26, 2009
Secretary of State

Entity Name: INNOVATIVE ENERGY GROUP OF FLORIDA, LLC

Current Principal Place of Business:

1752 SEALARK
NAVARRE, FL 32566

New Principal Place of Business:

Current Mailing Address:

1752 SEALARK
NAVARRE, FL 32566

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:

WRIGHT, ROBERT S
225 S ADAMS ST
SUITE 200
TALLAHASSEE, FL 32301 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: MGR () Delete
Name: PAUL, THOMAS
Address: 283 POPE PAUL PATH
City-St-Zip: DALLAS, GA 30132

Title: MGR () Delete
Name: STACY, FORREST F
Address: 1948 HARBOUR OAKS DRIVE
City-St-Zip: SNELLVILLE, GA 30078

Title: MGR () Delete
Name: MURCHISON, TRACY
Address: 65 RIDGEFIELD DRIVE
City-St-Zip: DOUGLASVILLE, GA 30134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STACY, FORREST F
Address: 1948 HARBOUR OAKS DRIVE
City-St-Zip: SNELLVILLE, GA 30078

Title: MGR (X) Change () Addition
Name: STACY, GREGG
Address: 5334 BIRCHLAND COURT
City-St-Zip: BUFORD, GA 30518

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: TRACY MURCHISON

MGR

02/26/2009

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