
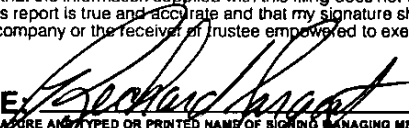


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 29, 2008 8:00 am
Secretary of State

05-29-2008 90012 035 ***538.75

DOCUMENT # L07000120660 1. Entity Name SUNCOAST ENVIRONMENTAL TECHNOLOGIES, L.L.C.					
Principal Place of Business 3102 DEBAZAN AVENUE WEST ST. PETE BEACH, FL 33706			Mailing Address 3102 DEBAZAN AVENUE WEST ST. PETE BEACH, FL 33706		
2. Principal Place of Business - No P.O. Box # 3200 DEBAZAN AVENUE W		3. Mailing Address 3200 DEBAZAN AVENUE W			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 26-1533352					
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required					
6. Name and Address of Current Registered Agent CANNON, HUGH W JR. 3102 DEBAZAN AVENUE WEST ST. PETE BEACH, FL 33706			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 3200 DEBAZAN AVENUE W 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 _____ (NOTE: Registered Agent signature required when reconstituting) DATE _____					
FILE NOW!!! FEE IS \$538.75 Due by September 12, 2008		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CANNON, HUGH W JR. 3102 DEBAZAN AVENUE WEST ST. PETE BEACH, FL 33706 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3200 DEBAZAN AVENUE W	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SARGENT, RICHARD E 9899 84TH WAY NORTH LARGO, FL 33777 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 608, Florida Statutes.					
SIGNATURE 			RICHARD SARGENT		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date 5/27/08 Daytime Phone # 727-453-9273		

50006166



05272008 Chg-LLC CR2E083 (12/06)