

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000076447

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: E2C, L.L.C.

**Current Principal Place of Business:**

12489 N.W. 44TH STREET  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

12489 N.W. 44TH STREET  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

FEI Number: 26-3218894

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WARRICK, WOODWARD C  
2881 E. OAKLAND PARK BLVD.  
208  
FORT LAUDERDALE, FL 33306 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: LEE, HEADLEY G  
Address: 12489 N.W. 44TH STREET  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGRM ( ) Delete  
Name: BOCCHINO, ERNEST G  
Address: 12489 N.W. 44TH STREET  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGRM ( ) Delete  
Name: BISPOTT, CLEVE A  
Address: 12489 N.W. 44TH STREET  
City-St-Zip: CORAL SPRINGS, FL 33065

**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: CLEVE BISPOTT

MGRM

04/29/2009

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