

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000091478

Entity Name: SAPP RECYCLING LLC

FILED  
Mar 05, 2009  
Secretary of State

**Current Principal Place of Business:**

1553 NE BASCOM NORRIS DR  
LAKE CITY, FL 32055

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 169  
WHITE SPRINGS, FL 32096

**New Mailing Address:**

P.O. BOX 136  
WHITE SPRINGS, FL 32096

FEI Number: 61-1570949

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WOODARD, CLAYTON E JR  
16641 RIVER ST.  
WHITE SPRINGS, FL 32096 US

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

WOODARD, CLAYTON E JR  
18112 SE CR 137  
WHITE SPRINGS, FL 32096 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: CLAYTON WOODARD JR

03/05/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete

Name:

Address:

City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition

Name: WOODARD, CLAYTON E JR

Address: 18112 SE CR 137

City-St-Zip: WHITE SPRINGS, FL 32096

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: CLAYTON E WOODARD JR

MGR

03/05/2009

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