

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000100366

FILED  
Apr 16, 2009  
Secretary of State

**Entity Name:** MUNICIPAL ENERGY ALTERNATIVES, LLC

**Current Principal Place of Business:**

1788 NORTH LOOP PARKWAY  
ST. AUGUSTINE, FL 32095 US

**New Principal Place of Business:**

**Current Mailing Address:**

1788 NORTH LOOP PARKWAY  
ST. AUGUSTINE, FL 32095 US

**New Mailing Address:**

**FEI Number:** ☐ **FEI Number Applied For ( )** ☐ **FEI Number Not Applicable (X)** ☒ **Certificate of Status Desired ( )** ☐

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

ADDISON, BETTY  
519 NW 60TH STREET  
SUITE A  
GAINESVILLE, FL 32607 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: SPH CONSULTING, LLC  
Address: 1788 NORTH LOOP PARKWAY  
City-St-Zip: ST. AUGUSTINE, FL 32095 US

Title: MGR ( ) Delete  
Name: OSCEOLA SCHOOL INVESTMENTS, LLC  
Address: 1301 RIVERPLACE BUILDING, SUITE 1500  
City-St-Zip: JACKSONVILLE, FL 32207 US

**ADDITIONS/CHANGES:**

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: SHAWN HIESTER

MM

04/16/2009

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