

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000105191

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** NEED TO RECYCLE, LLC

**Current Principal Place of Business:**

7004 NAVARRE PKWY  
NAVARRE, FL 32566 US

**New Principal Place of Business:**

5697 GOVERNMENT DR  
GULF BREEZE, FL 32563 US

**Current Mailing Address:**

7004 NAVARRE PKWY  
NAVARRE, FL 32566 US

**New Mailing Address:**

5697 GOVERNMENT DR  
GULF BREEZE, FL 32563 US

**FEI Number:** 27-1228896

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEISIUS, DAN  
7004 NAVARRE PKWY  
NAVARRE, FL 32566 US

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

WILLIAMS, CARL  
5697 GOVERNMENT DR  
GULF BREEZE, FL 32563 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: CARL WILLIAMS

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WILLIAMS, CHERYL  
Address: 5697 GOVERNMENT DR  
City-St-Zip: GULF BREEZE, FL 32563 US

Title: MGRM  
Name: WILLIAMS, CARL  
Address: 5697 GOVERNMENT DR  
City-St-Zip: GULF BREEZE, FL 32563 US

I hereby 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: CARL WILLIAMS

MGRM

04/30/2010

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