

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000000046

Entity Name: SPACE ACCESS, L.L.C.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

16105 SW 74TH CT
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

16105 SW 74TH CT
MIAMI, FL 33157

New Mailing Address:

FEI Number: 95-4563249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: SPACE ACCESS INNOVATIONS, INC.
Address: 15619 BALD EAGLE WAY
City-St-Zip: HUNTERTOWN, IN 46748

Title: MGRM () Delete
Name: PFG SPACE ACCESS INVESTMENTS, INC.
Address: 6187 CARPINTERIA AVE., SUITE 300
City-St-Zip: CARPINTERIA, CA 93014

Title: MGRM () Delete
Name: PACELLI FAMILY SPACE ACCESS, LLC
Address: 206 W AYRES
City-St-Zip: HINSDALE, IL 60521

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SPACE ACCESS INNOVATIONS, INC.
Address: 16105 SW 74TH CT
City-St-Zip: MIAMI, FL 33157

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: STEPHEN G WURST

MGRM

04/30/2008

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