

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002732

FILED
Jul 27, 2006
Secretary of State

Entity Name: PLASTOW ENTERPRISES, L.C.

Current Principal Place of Business:

16137 CRAIGEND PLACE
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

16137 CRAIGEND PLACE
ODESSA, FL 33556

New Mailing Address:

FEI Number: 91-1920328 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PLASTOW, DOUGLAS E
16137 CRAIGEND PLACE
ODESSA, FL 33556 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HEWLETT, JOHN B
Address: 2919 GRANITE HOLLOW STREET
City-St-Zip: SANDY, UT 84092

Title: MGRM () Delete
Name: LIGNELL, MILES E
Address: 2919 GRANITE HOLLOW STREET
City-St-Zip: SANDY, UT 84092

Title: MGRM () Delete
Name: PUTTERS & STRUTTERS,, INC.
Address: 16137 CRAIGEND PLACE
City-St-Zip: ODESSA, FL 33556

Title: MGRM () Delete
Name: PLASTOW FAMILY LIMIT, ED PARTNERSHIP
Address: 16137 CRAIGEND PLACE
City-St-Zip: ODESSA, FL 33556

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DOUGLAS E PLASTOW

RA

07/27/2006

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