2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# M00000000141

Entity Name: ETP, L.L.C.

Current Principal Place of Business:

34295 HWY 98
LILLIAN, AL 36549

New Principal Place of Business:

Current Mailing Address:

34295 HIGHWAY 98
LILLIAN, AL 36549

New Mailing Address:

FEI Number: 59-3607492 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOVERT, CHRISTOPHER P
5016 SKYLARK CT
PENSACOLA, FL 32505 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: PD ( ) Delete
Name: BOVERT, CHRISTOPHER
Address: 5260 MOBILE HWY.
City-St-Zip: PENSACOLA, FL 32526

Title: VP ( ) Delete
Name: HAYS, KELLY B
Address: 1723 EAST JACKSON ST
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES:

Title: PD (X) Change ( ) Addition
Name: BOVERT, CHRISTOPHER
Address: 5016 SKYLARK CRT
City-St-Zip: PENSACOLA, FL 32505

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: KELLY B. HAYS VP 04/14/2009

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