

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001983

FILED
Feb 07, 2007
Secretary of State

Entity Name: CELLXION, LLC

Current Principal Place of Business:

5031 HAZEL JONES RD.
BOSSIER CITY, LA 71111

New Principal Place of Business:

Current Mailing Address:

5031 HAZEL JONES RD.
BOSSIER CITY, LA 71111

New Mailing Address:

FEI Number: 72-1333762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOONOVER, STEVEN L
24 SCHOONS WAY
SANTA ROSA BEACH, FL 32459 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: SCHOONOVER, STEVEN L
Address: 937 COUNTY CLUB CIR
City-St-Zip: MINDEN, LA 71055

Title: MGRM () Delete
Name: SCHOONOVER INVESTMEN, TS LP
Address: 937 COUNTRY CLUB CIR
City-St-Zip: MINDEN, LA 71055

Title: MGRM () Delete
Name: BENT TREE INTERESTS,, LLC
Address: 370 BENT TREE LANE
City-St-Zip: MINDEN, LA 71055

Title: MGRM () Delete
Name: TODD INVESTMENTS, LL, C
Address: 5759 BAYOU DRIVE
City-St-Zip: BOSSIER CITY, LA 71112

Title: MGRM () Delete
Name: FREDRICKSON HOLDINGS, LLC
Address: 8500 N. HARRAH
City-St-Zip: HARRAH, OK 73045

Title: MGRM () Delete
Name: HOOD, JEFFREY
Address: 6337 SOUTHCREST DR
City-St-Zip: SHREVEPORT, LA 71119

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:

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

Title: MGRM (X) Change () Addition
Name: HOOD, JEFFREY
Address: 6006 KATELAND COURT
City-St-Zip: BOSSIER CITY, LA 71111

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: STEVEN L SCHOONOVER

MGRM

02/07/2007

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