

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001983

FILED
Mar 26, 2009
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 (X)

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

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

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

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SABRE INDUSTRIES, IN, C
Address: 1120 WELSH RD, STE 210
City-St-Zip: NORTH WALES, PA 19454

Title: MGR (X) Change () Addition
Name: DEAN, JAMES L
Address: 5031 HAZEL JONES RD
City-St-Zip: BOSSIER CITY, LA 71111

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

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Name:
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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: JAMES L. DEAN

MGR

03/26/2009

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