## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M02000000494

Entity Name: TWINSTACKS LOGISTICS, LLC

FILED Jan 23, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

650 S.E. PARADISE POINT RD #4444 987 N SUNCOAST BLVD #416 CRYSTAL RIVER, FL 34429 CRYSTAL RIVER, FL 34429

Current Mailing Address: New Mailing Address:

650 S.E. PARADISE POINT RD #4444 987 N SUNCOAST BLVD #416 CRYSTAL RIVER, FL 34429 CRYSTAL RIVER, FL 34429

FEI Number: 04-3597924 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BURNER, FRANKIE GRAHAM, SIDNEY D 420 NW 6TH ST, #6 3534 YOUNG ST.

CRYSTAL RIVEŔ, FL 34428 US TITUSVILLE, FL 32780 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: S. DANIEL GRAHAM 01/23/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 BURNER, FRANKIE
 Name:

 Address:
 420 NW 6TH ST, # 6
 Address:

 City-St-Zip:
 CRYSTAL RIVER, FL 34428
 City-St-Zip:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 GRAHAM, S D
 Name:
 GRAHAM, S D

 Address:
 3534 YOUNG ST.
 Address:
 3534 YOUNG ST.

 City-St-Zip:
 TITUSVILLE, FL
 TITUSVILLE, FL
 32780

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: FRANKIE BURNER MGR. 01/23/2008