2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000005592

Address:

City-St-Zip:

Entity Name: CORNERSTONE ENVIRONMENTAL GROUP, LLC

FILED Mar 29, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	AL RUN RD, ST DWN, NY 1094					
Current Mailing Address:			New Mailing Address:			
	AL RUN RD, ST WN, NY 1094					
FEI Number:	86-1154497	FEI Number Applied For ()	FEI Number Not Appli	icable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
515 EAST	GEXCELSIOR (PARK AVENUE SSEE, FL 3230					
The above in the State		ubmits this statement for the pur	rpose of changing it	s registered office or registered agent, or both		
SIGNATUR	RE:					
	Electronic	Signature of Registered Agent	t	Date		
MANAGING MEMBERS/MANAGERS:			ADDITIONS/C	ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM ()[PELUSO, RICHA 90 CRYSTAL RU MIDDLETOWN, N	N RD, STE 201	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	MGR ()[SWYKA, CATHEI 90 CRYSTAL RU MIDDLETOWN, N	N RD, STE 201	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	MGRM () Change (X) Addition FENN, DENNIS G 400 QUADRANGLE DR., SUITE E BOLINGBROOK, IL 60440		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	MGRM () Change (X) Addition KARL, KENNETH J 400 QUADRANGLE DR., SUITE E BOLINGBROOK, IL 60440		
Title: Name:	1()	Delete	Title: Name:	MGRM () Change (X) Addition MICHELS, MICHAEL S		

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.

Address:

City-St-Zip:

607 EASTERN AVENUE

PLYMOUTH, WI 53073

SIGNATURE: CATHERINE SWYKA MGR 03/29/2009