

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006416

FILED
May 01, 2008
Secretary of State

Entity Name: ECOLOGICAL ENTERPRISES, LLC

Current Principal Place of Business:

8503 HAVANA HWY
HAVANA, FL 32333

New Principal Place of Business:

429 HAVANA HWY
QUINCY, FL 32352

Current Mailing Address:

8503 HAVANA HWY
HAVANA, FL 32333

New Mailing Address:

429 HAVANA HWY
QUINCY, FL 32352

FEI Number: 59-3673708 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PLUMMER, SONJA
8503 HAVANA HWY
HAVANA, FL 32333 US

Name and Address of New Registered Agent:

PLUMMER, SONJA
429 HAVANA HWY
QUINCY, FL 32352 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: SONJA PLUMMER

05/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PLUMMER, SONJA
Address: 8503 HAVANA HWY
City-St-Zip: HAVANA, FL 32333

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PLUMMER, SONJA
Address: 429 HAVANA HWY
City-St-Zip: QUINCY, FL 32352

Title: MGRM () Change (X) Addition
Name: WINNE, LESLIE J
Address: 1609 DEFIANCE DR
City-St-Zip: CARBONDALE, CO 81623

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: SONJA PLUMMER

MGR

05/01/2008

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