

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032857

FILED
Jan 28, 2009
Secretary of State

Entity Name: ICHTHYOLOGICAL RESEARCH, LLC

Current Principal Place of Business:

3617 EAGLE NEST COURT
MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

3617 EAGLE NEST COURT
MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 20-0431412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHENKER, JONATHAN M
3617 EAGLE NEST COURT
MELBOURNE, FL 32904 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: SHENKER, JONATHAN M
Address: 3617 EAGLE NEST COURT
City-St-Zip: MELBOURNE, FL 32904 US

Title: MGRM () Delete
Name: SHENKER, SANDRA P
Address: 3617 EAGLE NEST COURT
City-St-Zip: MELBOURNE, FL 32904 US

ADDITIONS/CHANGES:

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

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: JONATHAN M. SHENKER MGR 01/28/2009

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