

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000123261

FILED
Apr 21, 2009
Secretary of State

Entity Name: BOUNTY ENTERPRISES, LLC

Current Principal Place of Business:

121 ALHAMBRA PLAZA, PH-1, STE 1600
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

121 ALHAMBRA PLAZA, PH-1, STE 1600
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 26-1775038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE ALLEN MORRIS COMPANY
121 ALHAMBRA PLAZA, PH-1, STE 1600
CORAL GABLES, FL 33134 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: MGRM () Delete
Name: MORRIS, W. ALLEN
Address: 121 ALHAMBRA PLAZA, PH-1, STE 1600
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: RENTZ, R. LARRY
Address: 121 ALHAMBRA PLAZA, PH-1, STE 1600
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: GRAHAM, DALE I
Address: 121 ALHAMBRA PLAZA, PH-1, STE 1600
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: GIL, YAZMIN
Address: 121 ALHAMBRA PLAZA, PH-1, STE 1600
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

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

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

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: YAZMIN GIL

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04/21/2009

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