

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000006960

FILED
Jul 02, 2009
Secretary of State

Entity Name: AVALNIS, LLC

Current Principal Place of Business:

10777 E FLOUNDER DRIVE
FLORAL CITY, FL 344362543

New Principal Place of Business:

Current Mailing Address:

10777 E FLOUNDER DRIVE
FLORAL CITY, FL 344362543

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

Name and Address of New Registered Agent:

COHEN, DIANE ESQ
111 W MAIN ST STE 203
INVERNESS, FL 34450 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: AVRIL SCHUCKMAN TRUSTEE UTD 11/9/06
Address: 10777 E FLOUNDER DRIVE
City-St-Zip: FLORAL CITY, FL 344362453

Title: MGRM () Delete
Name: SPELLMAN, ALFRED E
Address: 9172 COLLINS AVE APT 310
City-St-Zip: SURFSIDE, FL 33154

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: A SCHUCKMAN

MBR

07/02/2009

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