

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000000563

Entity Name: SIGN PARROT.COM LLC

FILED  
Jun 26, 2009  
Secretary of State

**Current Principal Place of Business:**

2020 HELM LN.  
VALRICO, FL 33594 US

**New Principal Place of Business:**

7933 E BROADWAY  
TAMPA, FL 33619 US

**Current Mailing Address:**

2020 HELM LN.  
VALRICO, FL 33594 US

**New Mailing Address:**

FEI Number: 26-1688501      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

WEBBER, DIANNE L  
2020 HELM LN.  
VALRICO, FL 33594 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: WEBBER, JOHN  
Address: 2020 HELM LN.  
City-St-Zip: VALRICO, FL 33594 US

Title: MGR ( ) Delete  
Name: WEBBER, DIANNE L  
Address: 2020 HELM LN.  
City-St-Zip: VALRICO, FL 33594 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: DIANNE L WEBBER

MGR

06/26/2009

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