

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000024306

FILED  
Mar 12, 2009  
Secretary of State

Entity Name: SHILENSKY ENTERPRISES, LLC

**Current Principal Place of Business:**

931 VILLAGE BLVD #909-509  
WEST PALM BEACH, FL 33409 US

**New Principal Place of Business:**

**Current Mailing Address:**

931 VILLAGE BLVD #909-509  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

FEI Number: 26-2295746      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHILENSKY, MARK A  
931 VILLAGE BLVD #905-509  
WEST PALM BEACH, FL 33409 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: SHILENSKY, MARK A  
Address: 931 VILLAGE BLVD #905-509  
City-St-Zip: WEST PALM BEACH, FL 33409

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

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SHILENSKY, MARK A  
Address: 931 VILLAGE BLVD #905-509  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: MGR ( ) Change (X) Addition  
Name: HOLLANDER, JUDITH B  
Address: 1478 CORYDON AVENUE  
City-St-Zip: SPRING HILL, FL 34609

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: MARK A. SHILENSKY

MGRM

03/12/2009

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