

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED  
Apr 29, 2009  
Secretary of State

DOCUMENT# L08000031212

Entity Name: 93 LINCOLN LLC

**Current Principal Place of Business:**

224 CHIPPEWA CIR.  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

224 CHIPPEWA CIR.  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NAVARRA, WILLIAM  
224 CHIPPEWA CIR.  
ORMOND BEACH, FL 32174 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: NAVARRA, WILLIAM  
Address: 224 CHIPPEWA CIR.  
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM ( ) Delete  
Name: ANTOS, JOSHUA  
Address: 112 HERITAGE CIR.  
City-St-Zip: ORMOND BEACH, FL 32174

**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: WILLIAM NAVARRA

MGRM

04/29/2009

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