2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 28, 2009
Secretary of State

DOCUMENT# L08000056372

Entity Name: PROPRIETOR INK LIMITED LIABILITY COMPANY

Current Principal Place of Business:

2341 SW LAWFORD ST
PORT ST LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

2341 SW LAWFORD ST
PORT ST LUCIE, FL 34953

New Mailing Address:

FEI Number: 80-0200365 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FRAZIER, MICHAEL B
2341 SW LAWFORD ST
PORT ST LUCIE, FL 34953 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: CEO ( ) Delete
Name: FRAZIER, MICHAEL B
Address: 2341 SW LAWFORD ST
City-St-Zip: PORT ST LUCIE, FL 34953

Title: MGRM ( ) Delete
Name: FRAZIER, VIRGINIA L
Address: 2341 SW LAWFORD ST
City-St-Zip: PORT ST LUCIE, FL 34953

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: FRAZIER, MICHAEL B
Address: 2341 SW LAWFORD ST
City-St-Zip: PORT ST LUCIE, FL 34953

Title: MEMB (X) Change ( ) Addition
Name: FRAZIER, VIRGINIA L
Address: 2341 SW LAWFORD ST
City-St-Zip: PORT ST LUCIE, FL 34953

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: MICHAEL B FRAZIER MGRM 01/28/2009

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