

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000008435

FILED  
Jan 30, 2009  
Secretary of State

Entity Name: MERRIGAN & CASSIDY LLC

**Current Principal Place of Business:**

8702 KNIGHTSBRIDGE COURT  
UNIT #D  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DIANNA H ASHTON INC  
430 STATE ROAD 436 STE 236  
CASSELBERRY, FL 32707

**New Mailing Address:**

FEI Number: 98-0388097

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DIANNA H ASHTON INC  
430 STATE ROAD 436  
SUITE 236  
CASSELBERRY, FL 32707 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: MERRIGAN, ANN  
Address: 28 MOLESWORTH STREET  
City-St-Zip: DUBLIN, 2 IRELAND IE

Title: MGRM ( ) Delete  
Name: CASSIDY, PETER  
Address: 28 MOLES WORTH STREET  
City-St-Zip: DUBLIN, 2 IRELAND IE

**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: ANN MERRIGAN

MGNR

01/30/2009

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