

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jan 07, 2009  
Secretary of State**

DOCUMENT# L01000000892

Entity Name: ACM, LLC

**Current Principal Place of Business:**

9660 WEST BAY HARBOR DR  
# 2C  
BAY HARBOR ISLAND, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

9660 WEST BAY HARBOR DR  
# 2C  
BAY HARBOR ISLAND, FL 33154

**New Mailing Address:**

FEI Number: 65-1069282      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MCKINNEY, ALLYN C  
9660 WEST BAY HARBOR DR  
# 2C  
BAY HARBOR ISLAND, FL 33154 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: MCKINNEY, ALLYN C  
Address: 9660 W BAY HARBOR DR # 2C  
City-St-Zip: BAY HARBOR, FL 33154

Title: MGR ( ) Delete  
Name: HERRUP, BECKY  
Address: P.O. BOX 54-7091  
City-St-Zip: SURFSIDE, FL 331547091

**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: ALLYN C. MCKINNEY

MGRM

01/07/2009

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