

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Apr 13, 2009
Secretary of State**

DOCUMENT# L01000001784

Entity Name: A. STILLMAN, LLC

Current Principal Place of Business:

C/O BILL T. SMITH, JR., P.A.
980 NORTH FEDERAL HIGHWAY, SUITE 402
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

C/O BILL T. SMITH, JR., P.A.
980 NORTH FEDERAL HIGHWAY, SUITE 402
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 65-1091017 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, BILL T ESQ.
980 NORTH FEDERAL HIGHWAY, SUITE 402
BOCA RATON, FL 33432 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: STILLMAN, ROGER
Address: 980 NORTH FEDERAL HIGHWAY, SUITE 402
City-St-Zip: BOCA RATON, FL 33432

Title: MGRM () Delete
Name: SMITH, JR, BILL T
Address: 980 NORTH FEDERAL HIGHWAY, SUITE 402
City-St-Zip: BOCA RATON, FL 33432

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: BILL T. SMITH, JR. MGRM 04/13/2009

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