

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012315

Entity Name: MARC'S MOBILITY, LLC

FILED
Jun 15, 2009
Secretary of State

Current Principal Place of Business:

5136 ATHENIA DRIVE
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

5136 ATHENIA DRIVE
LAKELAND, FL 33813

New Mailing Address:

FEI Number: 59-3737892 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

VANDER POEL, MARC
5136 ATHENIA DRIVE
LAKELAND, FL 33811 US

Name and Address of New Registered Agent:

VANDER POEL, MARC
5136 ATHENIA DRIVE
LAKELAND, FL 33813 US

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

06/15/2009

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VANDER POEL, MARC
Address: 5136 ATHENIA DRIVE
City-St-Zip: LAKELAND, FL 33811

Title: MGR () Delete
Name: VANDER POEL, FRAN
Address: 5136 ATHENIA DRIVE
City-St-Zip: LAKELAND, FL 33811

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VANDER POEL, MARC
Address: 5136 ATHENIA DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: MGR (X) Change () Addition
Name: VANDER POEL, FRAN
Address: 5136 ATHENIA DRIVE
City-St-Zip: LAKELAND, FL 33813

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: MARC VANDER POEL

MGR

06/15/2009

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