

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019620

FILED  
Jan 19, 2009  
Secretary of State

**Entity Name:** ANCHOR ACQUISITION & DEVELOPMENT COMPANY, LLC

**Current Principal Place of Business:**

809 SOUTH SAFFORD STREET, SUITE B  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 2208  
TARPON SPRINGS, FL 346882208

**New Mailing Address:**

**FEI Number:** 02-0551120

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ROETZOUKAS, JAMES  
809 S. SAFFORD AVE.  
UNIT B  
TARPON SPRINGS, FL 34689 US

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

BOUTZOUKAS, JAMES  
809 S. SAFFORD AVE.  
UNIT B  
TARPON SPRINGS, FL 34689 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: JAMES BOUTZOUKAS

01/19/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: KOKKINOS, NICK  
Address: 716 VIRGINIA AVENUE  
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: MGR ( ) Delete  
Name: BOUTZOUKAS, JAMES  
Address: 1761 ROYAL OAK PLACE WEST  
City-St-Zip: DUNEDIN, FL 34698 US

**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: JAMES BOUTZOUKAS

MGR

01/19/2009

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