

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000001452

FILED
Apr 04, 2009
Secretary of State

Entity Name: ZIPTRIPPER, LLC

Current Principal Place of Business:

BANK OF AMERICA CITY CENTRE
401 E. LAS OLAS BLVD. #130-168
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

BANK OF AMERICA CITY CENTRE
401 E. LAS OLAS BLVD. #130-168
FT. LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 03-0382233

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLE, TODD G II
1543 SE 13TH STREET
FT. LAUDERDALE, FL 33316 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: MGR () Delete
Name: COLE, TODD G II
Address: 1543 SE 13TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGR () Delete
Name: RAMNATH, RICHARD R
Address: 687 DEERHURST DRIVE
City-St-Zip: MELBOURNE, FL 32940

Title: MGR () Delete
Name: DAHLBECK, SCOTT
Address: 4202 78TH STREET 7
City-St-Zip: LUBOCK, TX 79423

Title: MGR (X) Delete
Name: WILLIAMS, CLAY
Address: 230 CARAVELLE DRIVE
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TODD COLE

MGR

04/04/2009

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