

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000005822

Entity Name: THE PREP, LLC

FILED  
Apr 23, 2009  
Secretary of State

**Current Principal Place of Business:**

7507 KINGSPOINTE PARKWAY  
SUITE 104  
ORLANDO, FL 32819

**New Principal Place of Business:**

100 SOUTH EOLA DRIVE  
UNIT 1413  
ORLANDO, FL 32801

**Current Mailing Address:**

7507 KINGSPOINTE PARKWAY  
SUITE 104  
ORLANDO, FL 32819

**New Mailing Address:**

100 SOUTH EOLA DRIVE  
UNIT 1413  
ORLANDO, FL 32801

FEI Number: 44-8629259

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILKINS, GERALD B  
7507 KINGSPOINTE PARKWAY  
SUITE 104  
ORLANDO, FL 32819 US

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

WILKINS, GERALD B  
100 SOUTH EOLA DRIVE  
UNIT 1413  
ORLANDO, FL 32801 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: GERAL B WILKINS

04/23/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WILKINS, GERALD B  
Address: 7507 KINGSPOINTE PKWY (SUITE 104)  
City-St-Zip: ORLANDO, FL 32819

Title: MEMB ( ) Delete  
Name: WILKINS, VITA  
Address: 7507 KINGSPOINTE PKWY (SUITE 104)  
City-St-Zip: ORLANDO, FL 32819

Title: MEMB ( ) Delete  
Name: WILKINS, DAMIEN  
Address: 7507 KINGSPOINTE PKWY (SUITE 104)  
City-St-Zip: ORLANDO, FL 32819

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WILKINS, GERALD B  
Address: 100 SOUTH EOLA DRIVE (UNIT 1413)  
City-St-Zip: ORLANDO, FL 32801

Title: MEMB (X) Change ( ) Addition  
Name: WILKINS, VITA  
Address: 100 SOUTH EOLA DRIVE (UNIT 1413)  
City-St-Zip: ORLANDO, FL 32801

Title: MEMB (X) Change ( ) Addition  
Name: WILKINS, DAMIEN  
Address: 100 SOUTH EOLA DRIVE (UNIT 1413)  
City-St-Zip: ORLANDO, FL 32801

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: GERLAD B WILKINS

MGRM

04/23/2009

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