2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011341

Address:

City-St-Zip:

5010 N. COOLIDGE AVE

TAMPA, FL 33614

Entity Name: ACCORD ENTERPRISES, LLC

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5010 N. COOLIDGE AVE. 3837 NORTHDALE BLVD., # 180 TAMPA, FL 33614 TAMPA, FL 33624 **Current Mailing Address: New Mailing Address:** 3837 NORTHDALE BLVD #180 3837 NORTHDALE BLVD., # 180 TAMPA, FL 33624 TAMPA, FL 33624 FEI Number: 01-0680665 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NORMAN, CHRISTOPHER H ESQ HINES NÓRMAN & ASSOCIATES, P.L. 315 S. HYDE PARK AVE. TAMPA, FL 33606 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 Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete Title: () Change () Addition EMERSON, JOHN J Name: Name: Address: 5010 N. COOLIDGE AVE Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: PRATT, ERIC S Name: Address: 5010 N. COOLIDGE AVE Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: Title: MGR () Delete Title: () Change () Addition EMERSON, GLENN F Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JOHN EMERSON MGM 04/08/2009