

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000012796

FILED
Jan 13, 2009
Secretary of State

Entity Name: THREE C, LLC

Current Principal Place of Business:

3475 WEST WILD DUNES PLACE
LECANTO, FL 34461

New Principal Place of Business:

3475 W. WILD DUNES PL
LECANTO, LE 34461

Current Mailing Address:

3475 WEST WILD DUNES PLACE
LECANTO, FL 34461

New Mailing Address:

3475 W. WILD DUNES PL
LECANTO, LE 34461

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BROCKETT, CLAUDIA M
3475 WEST WILD DUNES PLACE
LECANTO, FL 34461 US

Name and Address of New Registered Agent:

BROCKETT, CLAUDIA M
3475 W. WILD DUNES PL
LECANTO, FL 34461 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: CLAUDIA BROCKETT

01/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BROCKETT, CLAUDIA
Address: 3475 W. WILD DANES PL
City-St-Zip: LECANTO, FL 34461

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BROCKETT, CLAUDIA
Address: 3475 W. WILD DUNES PL
City-St-Zip: LECANTO, LE 34461

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: CLAUDIA BROCKETT

MS.

01/13/2009

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