

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000017452

FILED
Apr 21, 2009
Secretary of State

Entity Name: MITIGATION STRATEGIES LLC

Current Principal Place of Business:

1990 MAIN STREET
STE. 750
SARASOTA, FL 34236

New Principal Place of Business:

32161 CREEK TRAIL
PUNTA GORDA, FL 33950

Current Mailing Address:

P.O. BOX 7722
DALLAS, TX 75209

New Mailing Address:

P.O. BOX 2862
LONGVIEW, TX 75606-286

FEI Number: 27-0021500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCREYNOLDS, ALLEN D MGRM
1990 MAIN STREET
STE. 750
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

MCREYNOLDS, ALLEN D MGRM
32161 CREEK TRAIL
PUNTA GORDA, FL 33950 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: ALLEN D. MCREYNOLDS

04/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCREYNOLDS, ALLEN D
Address: P.O. BOX 7722
City-St-Zip: DALLAS, TX 75209

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: MCREYNOLDS, ALLEN D
Address: 1312 AMHERST LANE
City-St-Zip: LONGVIEW, TX 75601

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: ALLEN MCREYNOLDS

MGRM

04/21/2009

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