2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024338

Entity Name: PLADO, L.L.C.

Current Principal Place of Business:	**New Principal Place of Business:**
10748 DEERWOOD PARK BLVD. S. SUITE 107 JACKSONVILLE, FL 32256	

Current Mailing Address:	**New Mailing Address:**
10748 DEERWOOD PARK BLVD. S. SUITE 107 JACKSONVILLE, FL 32256	

FEI Number: 51-0427209   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:**
PLATOCK, BRIAN 10748 DEERWOOD PARK BLVD. S. JACKSONVILLE, FL 32256 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:**

Title: MGRM ( ) Delete Name: PLATOCK, BRIAN T Address: 1640 BEACH AVENUE City-St-Zip: ATLANTIC BEACH, FL 32233	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: MGRM ( ) Delete Name: MANSUR, AL Address: 2218 ALICIA LANE City-St-Zip: ATLANTIC BEACH, FL 32233	Title: MGRM (X) Change ( ) Addition Name: MANSUR, AL Address: 320 FIRST STREET N, #908 City-St-Zip: JACKSONVILLE BEACH, FL 32250
Title: MGRM ( ) Delete Name: DONZIGER, MICHAEL TRUSTEE Address: 8638 PHILLIPS HWY #3 City-St-Zip: JACKSONVILLE, FL 32256	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: BRIAN PLATOCK   MGRM   04/15/2009
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date