

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025372

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: SPACE COAST RENTAL, L.L.C.

**Current Principal Place of Business:**

990 PALM ST  
STE. 1  
PORT ST JOHN, FL 32927

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 549  
SHARPES, FL 32959

**New Mailing Address:**

FEI Number: 43-2011282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RASUL, FAIAZ M M.D.  
7227 NORTH US HIGHWAY 1  
COCOA, FL 32927 US

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

RASUL, FAIAZ M M.D.  
990 PALM STREET  
SUITE 1  
COCOA, FL 32927 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:

01/15/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RASUL, FAIAZ M M.D.  
Address: 990 PALM ST  
City-St-Zip: PORT ST JOHN, FL 32959

**ADDITIONS/CHANGES:**

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: CHERI CHEATHAM

RESP

01/15/2009

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