

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029031

Entity Name: EMERSON-PETERS LLC

FILED  
Jan 30, 2009  
Secretary of State

**Current Principal Place of Business:**

3990 MENENDEZ DRIVE  
PENSACOLA, FL 32503

**New Principal Place of Business:**

**Current Mailing Address:**

3990 MENENDEZ DRIVE  
PENSACOLA, FL 32503

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

HUSTON, GARY W  
125 W. ROMANA STREET, SUITE 800  
PENSACOLA, FL 32501 US

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

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:**

Title: P ( ) Delete  
Name: PETERS, DENNIS  
Address: 3990 MENENDEZ DR.  
City-St-Zip: PENSACOLA, FL 32503

Title: P ( ) Delete  
Name: EMERSON, RALPH W  
Address: 3976 MENEDEZ DR.  
City-St-Zip: PENSACOLA, FL 32503

**ADDITIONS/CHANGES:**

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

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: DENNIS PETERS

P

01/30/2009

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