

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000031497

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: U.S. RECREATIONAL ALLIANCE, LLC

**Current Principal Place of Business:**

820 SW 14TH COURT  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

820 SW 14TH COURT  
POMPANO BEACH, FL 33060

**New Mailing Address:**

FEI Number: 90-0072354

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STRAUSS, JAMIE  
820 SW 14TH CT  
POMPANO BEACH, FL 33060 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: MGRM ( ) Delete  
Name: STRAUSS, JAMIE  
Address: 971 E COUNTRY CLUB CIRCLE  
City-St-Zip: PLANTATION, FL 33317

Title: MGR (X) Delete  
Name: STRAUSS, CHARLENE  
Address: 971 E COUNTRY CLUB CIRCLE  
City-St-Zip: PLANTATION, FL 33317

**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: JAMIE STRAUSS

MGRM

04/27/2009

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