

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000033275

FILED  
May 01, 2009  
Secretary of State

Entity Name: DUREN & ASSOCIATES, LLC

**Current Principal Place of Business:**

122 LEGEND LAKES DRIVE  
P.O. BOX 9595  
PANAMA CITY, FL 32417 US

**New Principal Place of Business:**

122 LEGEND LAKES DRIVE  
PANAMA CITY BEACH, FL 32408 US

**Current Mailing Address:**

P O BOX 9595  
PANAMA CITY BEACH, FL 32417

**New Mailing Address:**

FEI Number: 13-4229961      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

DUREN, IKE  
122 LEGEND LAKES DRIVE  
BOX 9595  
PANAMA CITY BEACH, FL 32417 US

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

DUREN, ALISA E  
122 LEGEND LAKES DRIVE  
PANAMA CITY BEACH, FL 32408 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: ALISA E DUREN

05/01/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: VP ( ) Delete  
Name: DUREN, ALISA  
Address: 122 LEGEND LAKES DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: P ( ) Delete  
Name: DUREN, IKE  
Address: 122 LEGEND LAKES DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

**ADDITIONS/CHANGES:**

Title: PRES (X) Change ( ) Addition  
Name: DUREN, ALISA E  
Address: 122 LEGEND LAKES DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: VP (X) Change ( ) Addition  
Name: DUREN, CRISTIN L  
Address: 122 LEGEND LAKES DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

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: ALISA E DUREN

PRES

05/01/2009

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