

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