

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000033873

Entity Name: CLAXSTRAUSS, LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

7090 FRUITVILLE ROAD
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

7090 FRUITVILLE ROAD
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 45-0493744 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:

Name and Address of New Registered Agent:

TURNER, JAMES L
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CLAXTON, EVERETT
Address: 7090 FRUITVILLE RD
City-St-Zip: SARASOTA, FL 34240

Title: S () Delete
Name: STRAUSS, ROBERT
Address: 7090 FRUITVILLE RD
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: STRAUSS, ROBERT
Address: 7090 FRUITVILLE RD
City-St-Zip: SARASOTA, FL 34240

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: ROBERT STRAUSS

MGRM

05/01/2009

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