

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000001983

FILED
Mar 22, 2009
Secretary of State

Entity Name: CHOPESHAU L.L.C.

Current Principal Place of Business:

8048 SUMMER BREEZE
SPRING HILL, FL 34606

New Principal Place of Business:

Current Mailing Address:

8048 SUMMER BREEZE
SPRING HILL, FL 34606

New Mailing Address:

FEI Number: 06-1694681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAW, ROBERT P
8048 SUMMER BREEZE
SPRING HILL, FL 34606 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: CHOPE, RONALD D
Address: 6750 DONALDSON
City-St-Zip: TROY, MI 48085

Title: VP () Delete
Name: CHOPE, MATTHEW E
Address: 29259 STILLWATER
City-St-Zip: FARMINGTON, MI 48334

Title: T () Delete
Name: SHAW, ROBERT P
Address: 8048 SUMMER BREEZE
City-St-Zip: SPRING HILL, FL 34606

ADDITIONS/CHANGES:

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

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: ROBERT P. SHAW

T

03/22/2009

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