

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006941

FILED
Apr 24, 2009
Secretary of State

Entity Name: STRIKE-ZONE FISHING, LC

Current Principal Place of Business:

11702 BEACH BLVD.
JACKSONVILLE, FL 32246 US

New Principal Place of Business:

Current Mailing Address:

11702 BEACH BLVD
JACKSONVILLE, FL 32246 US

New Mailing Address:

11702 BEACH BLVD.
JACKSONVILLE, FL 32246 US

FEI Number: 01-0782925

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WORKMAN, DAVID E JR.
11702 BEACH BLVD
JACKSONVILLE, FL 32246 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: MGR () Delete
Name: PEEK, EUGENE G III
Address: 501 RIVERSIDE AVENUE, SUITE 6001
City-St-Zip: JACKSONVILLE, FL 32202

Title: MGR () Delete
Name: WORKMAN, DAVID E JR
Address: 11702 BEACH BLVD
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PEEK, EUGENE G III
Address: 501 RIVERSIDE AVENUE, SUITE 601
City-St-Zip: JACKSONVILLE, FL 32202

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: EUGENE G. PEEK III

MGR

04/24/2009

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