

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000007387

FILED
Mar 31, 2009
Secretary of State

Entity Name: EMERALL, LLC

Current Principal Place of Business:

4854 BUCIDA RD
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

C/O GILBERTH KINCLBEN
6219 COSTA LAKE POINT
FLOWERY BRANCH, GA 30542

New Mailing Address:

FEI Number: 34-1269830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREIDMAN, DAVID
4854 BUCIDA RD.
BOYNTON BEACH, FL 33436 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: KINCHEN, GILBERT H
Address: 6219 COSTA LAKE POINT
City-St-Zip: FLOWERY BRANCH, GA 30542

Title: MGR () Delete
Name: FRIEDMAN, DAVID
Address: 4854 BUCIDA RD
City-St-Zip: BOYNTON BEACH, FL 33436

Title: MGR () Delete
Name: FEUER, JOSEPH H
Address: 4101 N OCEAN BLVD
City-St-Zip: BOCA RATON, FL 33431

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: GILBERT H. KINCHEN

MR.

03/31/2009

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