2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000015221

123 LAKESHORE DR # 143

NORTH PALM BEACH, FL 33408

Address:

City-St-Zip:

Entity Name: OCEAN TRUST LLC

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 123 LAKESHORE DR #143 NORTH PALM BEACH, FL 33408 **Current Mailing Address: New Mailing Address:** 123 LAKESHORE DR #143 NORTH PALM BEACH, FL 33408 FEI Number: 56-2366533 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MEDALIAN, JALIL 123 LAKESHORE DR #143 NORTH PALM BEACH, FL 33408 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: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete MEDALIAN, JALIL Name: Name: Address: 123 LAKESHORE DR #143 Address: City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: MEDALIAN, AFSANEH Name: Address: 123 LAKESHORE DR #143 Address: City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: Title: MGR () Delete Title: () Change () Addition MEDALIAN, BOBAC Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JALIL MEDALIAN MGR 04/15/2009