

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030147

**FILED**  
**Feb 22, 2009**  
**Secretary of State**

**Entity Name:** UNLIMITED HOLDINGS, LLC

**Current Principal Place of Business:**

6252 COMMERCIAL WAY #229  
BROOKSVILLE, FL 34613

**New Principal Place of Business:**

**Current Mailing Address:**

6252 COMMERCIAL WAY #229  
BROOKSVILLE, FL 34613

**New Mailing Address:**

FEI Number: 20-0157365

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCEBBA, ANGELO  
6252 COMMERCIAL WAY #229  
BROOKSVILLE, FL 34613 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: MGRM ( ) Delete  
Name: SCEBBA, ANGELO  
Address: 6252 COMMERCIAL WAY #229  
City-St-Zip: BROOKSVILLE, FL 34613

Title: MGRM ( ) Delete  
Name: SCEBBA, SYLVIA  
Address: 6252 COMMERCIAL WAY #229  
City-St-Zip: BROOKSVILLE, FL 34613

**ADDITIONS/CHANGES:**

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: ANGELO SCEBBA

MGRM

02/22/2009

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