

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033382

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: BENNET PARKE SALONS, LLC

**Current Principal Place of Business:**

15921  
GREEN COVE BLVD.  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

15921 GREEN COVE BLVD  
CLERMONT, FL 34711

**New Mailing Address:**

FEI Number: 20-0256489

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PARKE, BENNET I  
15921 GREEN COVE BLVD  
CLERMONT, FL 34711 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: PARKE, BENNET I  
Address: 15921 GREEN COVE BLVD  
City-St-Zip: CLERMONT, FL 34711

Title: MGRM ( ) Delete  
Name: REX, JOHN  
Address: 5504 BROOKLINE DRIVE  
City-St-Zip: ORLANDO, FL 32819

**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: BENNET PARKE

MGR

01/15/2009

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