

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000034933

Entity Name: SB ASSOCIATES, LLC

FILED  
Mar 12, 2009  
Secretary of State

## Current Principal Place of Business:

13833 WELLINGTON TRACE E4  
# 218  
WELLINGTON, FL 33414 US

## New Principal Place of Business:

## Current Mailing Address:

13833 WELLINGTON TRACE E4  
#218  
WELLINGTON, FL 33414 US

## New Mailing Address:

FEI Number: 20-0235081

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SENE, ISMAEL  
13833 WELLINGTON TRACE E4  
# 218  
WELLINGTON, FL 33414 US

## Name and Address of New Registered Agent:

PRESCOTT, RICHARD M  
13833 WELLINGTON TRACE E4  
# 218  
WELLINGTON, FL 33414 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: RICHARD M. PRESCOTT

03/12/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: PRESCOTT, WILLIAM P MGMR  
Address: 1375 WEST CANAL STREET  
City-St-Zip: BELLE GLADE, FL 33430 US

Title: MGMR ( ) Delete  
Name: PRESCOTT, WILLIAM P MGMR  
Address: 1375 WEST CANAL ST  
City-St-Zip: BELLE GLADE, FL 33430

Title: MGMR ( ) Delete  
Name: PRESCOTT, RICHARD M MGMR  
Address: 1375 WEST CANAL STREET  
City-St-Zip: BELLE GLADE, FL 33430

## 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: RICHARD M. PRESCOTT

MGRM

03/12/2009

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