

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038264

FILED
Apr 08, 2009
Secretary of State

Entity Name: PINETRADE, LLC

Current Principal Place of Business:

5851 TIMUQUANA RD.
SUITE 104
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

5851 TIMUQUANA RD.
SUITE 104
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 20-0281921

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROSBY, RUSSELL B
5851 TIMUQUANA RD.
SUITE 104
JACKSONVILLE, FL 32210 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: CROSBY, RUSSELL
Address: 5851 TIMUQUANA RD. STE 104
City-St-Zip: JACKSONVILLE, FL 32210

Title: MGRM () Delete
Name: ANDERSON, ARTHUR
Address: 5851 TIMUQUANA RD. STE 104
City-St-Zip: JACKSONVILLE, FL 32210

Title: MGR () Delete
Name: BLANTON, REESE
Address: 5851 TIMUQUANA RD. STE 104
City-St-Zip: JACKSONVILLE, FL 32210

Title: MGR () Delete
Name: FEUER, MARTIN
Address: 5851 TIMUQUANA RD. STE 104
City-St-Zip: JACKSONVILLE, FL 32210

Title: MGR () Delete
Name: HUDSON, JAY
Address: 5851 TIMUQUANA RD. STE 104
City-St-Zip: JACKSONVILLE, FL 32210

Title: MGR () Delete
Name: CROSBY, J. ELLIS JR.
Address: 5851 TIMUQUANA RD. STE 104
City-St-Zip: JACKSONVILLE, FL 32210

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:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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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: RUSSELL CROSBY

MGRM

04/08/2009

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