2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039342

Entity Name: COURTNEY MAX, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
1850 E MAIN ST LEESBURG, FL 32748	

Current Mailing Address:	**New Mailing Address:**
478 E. ALTAMONTE DRIVE SUITE 108, PMB 510 ALTAMONTE SPRINGS, FL 32701	270 SE 95 STREET OCALA, FL 34480

FEI Number: 20-0551386   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:**
STONE, STEPHEN M 725 N. MAGNOLIA AVE. ORLANDO, FL 32803 US	ALLEN, TYLER MGRM 478 E ALTAMONTE DR. SUTIE 108 PMB 510 ALTAMONTE SPRINGS, FL 32701 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: TYLER ALLEN   01/31/2008

                   Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	ALLEN, TYLER	Name:	ALLEN, TYLER MGRM
Address:	478 E ALTAMONTE DR., SUITE 108 PMB 510	Address:	478 E ALTAMONTE DR., SUITE 108 PMB 510
City-St-Zip:	ALTAMONTE SPRINGS, FL 32701	City-St-Zip:	ALTAMONTE SPRINGS, FL 32701

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	RAMIREZ, RAMONA	Name:	
Address:	478 E ALTAMONTE DR., SUITE 108 PMB 510	Address:	
City-St-Zip:	ALTAMONTE SPRINGS, FL 32701	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: TYLER ALLEN   MGRM   01/31/2008

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