

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047625

FILED
Apr 01, 2009
Secretary of State

Entity Name: CHARLES E. STANKARD, LLC

Current Principal Place of Business:

1555 KINGSLEY AVENUE
SUITE 503
ORANGE PARK, FL 32073 US

New Principal Place of Business:

Current Mailing Address:

1555 KINGSLEY AVENUE
SUITE 503
ORANGE PARK, FL 32073 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANKARD, CHARLES E
1555 KINGSLEY AVENUE
SUITE 503
ORANGE PARK, FL 32073 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: STANKARD, CHARLES E
Address: 1555 KINGSLEY AVENUE, SUITE 503
City-St-Zip: ORANGE PARK, FL 32073 US

Title: MGRM () Delete
Name: STANKARD, HEATHER
Address: 1555 KINGSLEY AVENUE, SUITE 503
City-St-Zip: ORANGE PARK, FL 32073 US

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: CHARLES STANKARD MGM 04/01/2009

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