2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000008159

1650 DAIQUIRI LANE

LUTZ, FL 33549

Address:

City-St-Zip:

Entity Name: DAIQUIRI LANE LLC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1630 DAIQUIRI LANE LUTZ, FL 33549 **Current Mailing Address: New Mailing Address:** 1630 DAIQUIRI LANE LUTZ, FL 33549 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MROCZKOWSKI, CYNTHIA G 1630 DAIQUIRI LANE LUTZ, FL 33549 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: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete MROCZKOWSKI, CYNTHIA G Name: Name: Address: 1630 DAIQUIRI LANE Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: DAVIS, JEFFREY A Name: Address: 1707 DAIQUIRI LANE Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BOGER, DAN DAVID Name: Name: Address: 1834 DAIQUIRI LANE Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: HARDY, SUSAN P Name:

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.

Address:

City-St-Zip:

SIGNATURE: CYNTHIA G. MROCZKOWSKI MGR 04/30/2009