

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000017007

FILED
Mar 30, 2009
Secretary of State

Entity Name: DENNY'S SEPTIC SERVICE, L.C.

Current Principal Place of Business:

11571 APPALOOSA COURT
PORT ST. LUCIE, FL 34987

New Principal Place of Business:

11571 APPALOOSA COURT
PORT ST. LUCIE, FL 34987 US

Current Mailing Address:

11571 APPALOOSA COURT
PORT ST. LUCIE, FL 34987

New Mailing Address:

11571 APPALOOSA COURT
PORT ST. LUCIE, FL 34987 US

FEI Number: 55-0861363

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASSEY, DENNY R
11571 APPALOOSA COURT
PORT ST. LUCIE, FL 34987 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: MGR () Delete
Name: MASSEY, DENNY R
Address: 11571 APPALOOSA COURT
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: MGRM () Delete
Name: SPEARS, MICHAEL
Address: 982 SOUTHWEST AURELIA AVENUE
City-St-Zip: PORT SAINT LUCIE, FL

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MASSEY, DENNY R
Address: 11571 APPALOOSA COURT
City-St-Zip: PORT ST. LUCIE, FL 34987 US

Title: MGRM (X) Change () Addition
Name: SPEARS, MICHAEL
Address: 967 SOUTHWEST AURELIA AVENUE
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

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: DENNY R. MASSEY

MGR

03/30/2009

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