

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031627

FILED
Jan 07, 2009
Secretary of State

Entity Name: KRAUSE, BOYER, PUDDICOMBE, LLC

Current Principal Place of Business:

P.O. BOX 25531
TAMPA, FL 33622

New Principal Place of Business:

1300 N WESTSHORE BLVD
250
TAMPA, FL 33607

Current Mailing Address:

P.O. BOX 25531
TAMPA, FL 33622

New Mailing Address:

FEI Number: 20-1452899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYTS, ANDREW J ESQ
105 S TAMPANIA AVE, STE 200
TAMPA, FL 33609 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: KRAUSE, THOMAS S
Address: P.O. BOX 25531
City-St-Zip: TAMPA, FL 33622

Title: MGR () Delete
Name: BOYER, JOHN R
Address: P.O. BOX 25531
City-St-Zip: TAMPA, FL 33622

Title: MGR () Delete
Name: PUDDICOMBE, H. JAMIE
Address: P.O. BOX 25531
City-St-Zip: TAMPA, FL 33622

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:

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: THOMAS S KRAUSE

MR

01/07/2009

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