

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000033698

FILED
Apr 24, 2009
Secretary of State

Entity Name: FOUR Q, LLC

Current Principal Place of Business:

1074 N. ORANGE AVENUE
SARASOTA, FL 34236 US

New Principal Place of Business:

ONE S. SCHOOL AVE
SUITE 500
SARASOTA, FL 34237 US

Current Mailing Address:

1074 N. ORANGE AVENUE
SARASOTA, FL 34236 US

New Mailing Address:

ONE S. SCHOOL AVE
SUITE 500
SARASOTA, FL 34237 US

FEI Number: 20-1073788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GATES, CHAD L
1074 N. ORANGE AVENUE
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

GATES, CHAD L
ONE S. SCHOOL AVE
SUITE 500
SARASOTA, FL 34237 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:

04/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DRIGGERS, JIMMY Y
Address: 8425 EAGLE PRESERVE WAY
City-St-Zip: SARASOTA, FL 34241

Title: MGR () Delete
Name: GATES, CHAD L
Address: 1074 N ORANGE AVE STE 103
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: GATES, CHAD L
Address: ONE S. SCHOOL AVE, SUITE 500
City-St-Zip: SARASOTA, FL 34237

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: CHAD L. GATES

MGR

04/24/2009

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