

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040812

FILED
Feb 04, 2009
Secretary of State

Entity Name: EILEEN MIKULECKY, LLC

Current Principal Place of Business:

2612 LOST BALL DR
SEBRING, FL 33872 US

New Principal Place of Business:

Current Mailing Address:

2612 LOST BALL DR
SEBRING, FL 33872 US

New Mailing Address:

FEI Number: 20-2702332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHOADES, CLIFFORD R ESQ.
227 NORTH RIDGEWOOD DRIVE
SEBRING, FL 33870 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: MIKULECKY, EILEEN
Address: 2612 LOST BALL DRIVE
City-St-Zip: SEBRING, FL 33872 US

Title: MGRM () Delete
Name: MIKULECKY, GARY A
Address: 2612 LOST BALL DRIVE
City-St-Zip: SEBRING, FL 33872 US

Title: MGRM () Delete
Name: MIKULECKY, TERRANCE P
Address: 3606 38TH ST. NW
City-St-Zip: ROCHESTER, MN 55906 US

Title: MGRM () Delete
Name: MIKULECKY, JANE L
Address: 1116 145TH ST. E.
City-St-Zip: BURNSVILLE, MN 55337

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:

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: EILEEN MIKULECKY

MSRM

02/04/2009

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