2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000043412

FILED Mar 24, 2009 Secretary of State

Entity Name: ACTIONS - DOG TRAINING DAY & NIGHT CARE CENTER L.L.C.

Current Principal Place of Business: New Principal Place of Business:

1111 ST. JOHNS BLUFF ROAD N. JACKSONVILLE, FL 32225

Current Mailing Address: New Mailing Address:

1111 ST. JOHNS BLUFF ROAD N. JACKSONVILLE, FL 32225

FEI Number: 59-3731137 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POLLARD, LISA P
1111 ST. JOHNS BLUFF ROAD N.
JACKSONVILLE, FL 32225 US
RUSSELL, LISA P
1111 ST. JOHNS BLUFF ROAD N.
JACKSONVILLE, FL 32225 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: LISA RUSSELL 03/24/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition RUSSELL, ROBERT B Name: RUSSELL, ROBERT B Name: 1604 STOCKTON STREET Address: 1111 ST. JOHNS BLUFF RD. N Address: City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: JACKSONVILLE, FL 32225

Title: MGRM () Delete Title: () Change () Addition Name: LLOYD, LESLIE Name:

 Address:
 7247 HIELO DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32211
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: POLLARD, LISA Name: RUSSELL, LISA

Address: 1111 SAINT JOHNS BLUFF ROAD Address: 1111 ST. JOHNS BLUFF ROAD City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32225

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: ROBERT B. RUSSELL MGRM 03/24/2009