2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000045930

207 CLARION AVE

DECATUR, GA 30030

Address:

City-St-Zip:

Entity Name: THE BREAUX FAMILY LLC

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 514 GULF SHORE DRIVE DESTIN, FL 32541 **Current Mailing Address: New Mailing Address:** 154 ANNA BELLE LN NW CLEVELAND, TN 37312 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: REED, THOMAS G III HELMICH, KEVIN M P.A. 36468 EMERALD COAST PARKWAY, SUITE 7102 4481 LEGENDARY DRIVE, SUITE 200 DESTIN, FL 32541 SUITE 200 DESTIN, FL 32540 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: KEVIN M. HELMICH 01/21/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete BREAUX, ANNIE LAURA Name: Name: 154 ANNA BELLE LN NW Address: Address: City-St-Zip: CLEVELAND, TN 37312 City-St-Zip: Title: MGR () Delete Title: () Change () Addition BREAUX, ALFRED O Name: Name: Address: 6111 LAUREL DR Address: City-St-Zip: NEWBURGH, IN 47630 City-St-Zip: Title: MGR () Delete Title: () Change () Addition BREAUX, JAMES A JR Name: Name: Address: 4937 POSTOAK DR Address: City-St-Zip: ROCK HILL, SC 29732 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: ADAMS, MICHELE M Name: Address: 35 WILLIAMS AVE Address: City-St-Zip: RICHMOND HILL, GA 31324 City-St-Zip: Title: MGR () Delete Title: () Change () Addition BREAUX, STEVEN T Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: ANNIE LAURA BREAUX MGRM 01/21/2009