2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048911

Entity Name: ARBDA, L.L.C.

Address:

City-St-Zip:

4642 NW 12TH PLACE

GAINESVILLE, FL 32605

FILED Feb 16, 2009 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 4923 NW 27TH COURT GAINESVILLE, FL 32606 **Current Mailing Address: New Mailing Address:** 4642 NW 12TH PLACE GAINESVILLE, FL 32605 FEI Number: 20-1353269 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: SPIESS, BARBARA K 4642 NW 12TH PLACE GAINESVILLE, FL 32605 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SPIESS, DANIEL L Name: Name: Address: 4642 NW 12TH PLACE Address: City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: SPIESS, BARBARA K 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: BARBARA SPIESS MGRM 02/16/2009