2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050109

Entity Name: 2509 1ST STREET, LLC

FILED Jan 07, 2008 Secretary of State

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

420 20TH AVE.

INDIAN ROCKS BEACH, FL 33785

Current Mailing Address: New Mailing Address:

420 20TH AVE

INDIAN ROCKS BEACH, FL 33785

FEI Number: 20-1335553 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:

SMITH, PETER A 2036 20TH AVENUE PARKWAY INDIAN ROCKS BEACH, FL 33785 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:

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

 Name:
 SMITH, PETER A
 Name:

 Address:
 2036 - 20TH AVENUE PARKWAY
 Address:

 City-St-Zip:
 INDIAN ROCKS BEACH, FL 33785
 City-St-Zip:

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

 Name:
 SMITH, PARASQUEVI
 Name:

 Address:
 2036 - 20TH AVENUE PARKWAY
 Address:

 City-St-Zip:
 INDIAN ROCKS BEACH, FL 33785
 City-St-Zip:

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

Name:HAROCOPOS, EVELYNName:HAROCOPOS, EVELYNAddress:2036 - 20TH AVENUE PARKWAYAddress:420 20TH AVENUE

City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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

Name: HAROCOPOS, MARIA Name: HAROCOPOS, MARIA
Address: 2036 - 20TH AVENUE PARKWAY Address: 2012 BAY BLVD

City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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

Name: HAROCOPOS, LAMPROS Name: HAROCOPOS, LAMPROS

Address: 402 20TH AVE Address: 420 20TH AVE

City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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: PARASQUEVI SMITH MGRM 01/07/2008