

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000051026

Entity Name: 6914 E. FOWLER, L.L.C.

FILED
Apr 06, 2009
Secretary of State

Current Principal Place of Business:

6914 EAST FOWLER AVE
SUITE J
TAMPA, FL 336171705 US

New Principal Place of Business:

Current Mailing Address:

6914 EAST FOWLER AVE
SUITE J
TAMPA, FL 336171705 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEEKLEY, A. S. JR.
6914 EAST FOWLER AVE
SUITE J
TAMPA, FL 336171705 US

Name and Address of New Registered Agent:

WEEKLEY, JR., A. S.
6914 EAST FOWLER AVE
SUITE J
TAMPA, FL 336171705 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: A. S. WEEKLEY, JR.

04/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WEEKLEY, A. S. JR.
Address: 6914 EAST FOWLER AVE, SUITE J
City-St-Zip: TAMPA, FL 336171705 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WEEKLEY, JR., A. S.
Address: 6914 EAST FOWLER AVE, SUITE J
City-St-Zip: TAMPA, FL 336171705 US

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: A. S. WEEKLEY, JR.

MGR

04/06/2009

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