

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000051302

Entity Name: EMANP, LLC

FILED
Mar 31, 2009
Secretary of State

Current Principal Place of Business:

550 MEMORIAL CIRCLE, STE. N
ORMOND BEACH, FL 32174

New Principal Place of Business:

1545 HAND AVENUE
SUITE B3
ORMOND BEACH, FL 32174

Current Mailing Address:

550 MEMORIAL CIRCLE, STE. N
ORMOND BEACH, FL 32174

New Mailing Address:

1545 HAND AVENUE
SUITE B3
ORMOND BEACH, FL 32174

FEI Number: 20-1350396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUBIN, PATRIZIA
550 MEMORIAL CIRCLE, STE. N
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

RUBIN, PATRIZIA
1545 HAND AVENUE
SUITE B3
ORMOND BEACH, FL 32174 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: PATRIZIA RUBIN

03/31/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RUBIN, PATRIZIA
Address: 550 MEMORIAL CIRCLE SUITE N
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RUBIN, PATRIZIA
Address: 1545 HAND AVENUE - SUITE B3
City-St-Zip: ORMOND BEACH, FL 32174

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: PATRIZIA RUBIN

MRS

03/31/2009

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