

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054389

FILED
Jan 22, 2009
Secretary of State

Entity Name: GUN SNOT LLC

Current Principal Place of Business:

12443 SAN JOSE BLVD
SUITE 1004
JACKSONVILLE, FL 32223 US

New Principal Place of Business:

Current Mailing Address:

12443 SAN JOSE BLVD
SUITE 1004
JACKSONVILLE, FL 32223 US

New Mailing Address:

FEI Number: 20-1395128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, C R
9250 BAYMEADOWS ROAD
450
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

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:

Title: PRES () Delete
Name: SHAFFER, J. SCOTT
Address: 1112 KALMIA COURT
City-St-Zip: FRUIT COVE, FL 32259 US

Title: CEO () Delete
Name: SHAFFER, VIRGINIA
Address: 1112 KALMIA COURT
City-St-Zip: FRUIT COVE, FL 32259

Title: VP () Delete
Name: SHAFFER, ALEXANDRA
Address: 1112 KALMIA COURT
City-St-Zip: JACKSONVILLE, FL 32259 US

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: SHAFFER, J
Address: 12443 SAN JOSE BLVD STE 1004
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: CEO (X) Change () Addition
Name: SHAFFER, V
Address: 12443 SAN JOSE BLVD STE 1004
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP (X) Change () Addition
Name: SHAFFER, A
Address: 12443 SAN JOSE BLVD STE 1004
City-St-Zip: JACKSONVILLE, FL 32223 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: JS SHAFFER

PRES

01/22/2009

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