

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000055129

Entity Name: GRANDITS, LLC

FILED
Jan 12, 2009
Secretary of State

Current Principal Place of Business:

P.O. BOX 48602
ST. PETERSBURG, FL 33743

New Principal Place of Business:

54 DOLPHIN DR.
TREASURE ISLAND, FL 33706

Current Mailing Address:

P.O. BOX 48602
ST. PETERSBURG, FL 33743

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:

KELLY, CHERYL B
54 DOLPHIN DRIVE
TREASURE ISLAND, FL 33706 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: MGRM () Delete
Name: GRANDITS, WALTER
Address: P.O. BOX 48602
City-St-Zip: ST. PETERSBURG, FL 33743

Title: MGR () Delete
Name: KELLY, CHERYL B
Address: P.O. BOX 48602
City-St-Zip: ST. PETERSBURG, FL 33743

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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: CHERYL B. KELLY

MGR

01/12/2009

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