

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056213

FILED
Apr 27, 2009
Secretary of State

Entity Name: PLOCHARCZYK INTERESTS LLC

Current Principal Place of Business:

5975 WILSON BLVD.
11
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

Current Mailing Address:

634 HIBERNIA OAKS DRIVE
GREEN COVE SPRINGS, FL 32043 US

New Mailing Address:

634 HIBERNIA OAKS DRIVE
FLEMING ISLAND, FL 32003 US

FEI Number: 20-1535176

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PLOCHARCZYK, THOMAS J
634 HIBERNIA OAKS DRIVE
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

PLOCHARCZYK, THOMAS J
634 HIBERNIA OAKS DRIVE
FLEMING ISLAND, FL 32003 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: THOMAS J PLOCHARCZYK

04/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PLOCHARCZYK, THOMAS J
Address: 634 HIBERNIA OAKS DRIVE
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: MGRM () Delete
Name: PLOCHARCZK, LEONARD P JR.
Address: 634 HIBERNIA OAKS DRIVE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PLOCHARCZYK, THOMAS J
Address: 634 HIBERNIA OAKS DRIVE
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: MGRM (X) Change () Addition
Name: PLOCHARCZK, LEONARD P JR.
Address: 634 HIBERNIA OAKS DRIVE
City-St-Zip: FLEMING ISLAND, FL 32003

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: THOMAS J PLOCHARCZYK

MR.

04/27/2009

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