

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057214

Entity Name: ROBERT DUPREE LLC

FILED  
Jul 07, 2009  
Secretary of State

**Current Principal Place of Business:**

9940 SANDLER RD  
JACKSONVILLE, FL 32222

**New Principal Place of Business:**

**Current Mailing Address:**

9940 SANDLER RD  
JACKSONVILLE, FL 32222

**New Mailing Address:**

FEI Number: 33-1098227      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

DUPREE, ROBERT M  
9940 SANDLER RD  
JACKSONVILLE, FL, FL 32222      US

**Name and Address of New Registered Agent:**

DUPREE, ROBERT M  
9940 SANDLER RD  
JACKSONVILLE, FL 32222      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: \_\_\_\_\_

Electronic Signature of Registered Agent

07/07/2009

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: DUPREE, ROBERT M  
Address: 9940 SANDLER RD  
City-St-Zip: JACKSONVILLE, FL 32222

**ADDITIONS/CHANGES:**

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: ROBERT DUPREE

OWNE

07/07/2009

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