

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065315

FILED
Feb 06, 2009
Secretary of State

Entity Name: MATRY LLC

Current Principal Place of Business:

1620 CARILLON PARK DRIVE
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

1620 CARILLON PARK DRIVE
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 20-1857580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKROCKI, DAVID A
1620 CARILLON PARK DRIVE
OVIEDO, FL 32765 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: SKROCKI, DAVID A
Address: 1620 CARILLON PARK DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: MGRM () Delete
Name: FLEMING, RANDALL E
Address: PO BOX 2210
City-St-Zip: LAND O LAKES, FL 34639

Title: MGRM () Delete
Name: VERMALES, PEDRO E
Address: 2889 ALOMA LAKE RUN
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES:

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

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: DAVID A SKROCKI

MGRM

02/06/2009

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