

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000075306

Entity Name: MCMERCER LLC

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

130 87TH AVENUE
TREASURE ISLAND, FL 33706

New Principal Place of Business:

300 BAY PLAZA
TREASURE ISLAND, FL 33706

Current Mailing Address:

130 87TH AVENUE
TREASURE ISLAND, FL 33706

New Mailing Address:

300 BAY PLAZA
TREASURE ISLAND, FL 33706

FEI Number: 20-1811251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERCER, JANE
130 87TH AVENUE
TREASURE ISLAND, FL 33706 US

Name and Address of New Registered Agent:

MERCER, JANE
300 BAY PLAZA
TREASURE ISLAND, FL 33706 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:

04/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: CEO () Delete
Name: MERCER, JANE
Address: 130 87TH AVENUE
City-St-Zip: TREASURE ISLAND, FL 33706

Title: MGRM () Delete
Name: MCBRIDE, JEFFREY
Address: 130 87TH AVENUE
City-St-Zip: TREASURE ISLAND, FL 33706

ADDITIONS/CHANGES:

Title: CEO (X) Change () Addition
Name: MERCER, JANE
Address: 300 BAY PLAZA
City-St-Zip: TREASURE ISLAND, FL 33706

Title: MGRM (X) Change () Addition
Name: MCBRIDE, JEFFREY
Address: 300 BAY PLAZA
City-St-Zip: TREASURE ISLAND, FL 33706

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: K. JANE MERCER

CEO

04/20/2009

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