

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078124

Entity Name: EMPIRE ASSET GROUP, LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

1009 NORTH PALM AVENUE
ORLANDO, FL 32804 US

New Principal Place of Business:

501 N. ORLANDO AVE.
313-186
WINTER PARK, FL 32789 US

Current Mailing Address:

1009 NORTH PALM AVENUE
ORLANDO, FL 32804 US

New Mailing Address:

501 N. ORLANDO AVE.
313-186
WINTER PARK, FL 32789 US

FEI Number: 81-0657894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCALLA-WATSON, RENEE
1009 NORTH PALM AVENUE
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

MCCALLA-WATSON, RENEE
501 N. ORLANDO AVE.
313-186
WINTER PARK, FL 32789 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:

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCCALLA-WATSON, RENEE
Address: 1009 NORTH PALM AVENUE
City-St-Zip: ORLANDO, FL 32804 US

Title: MGR () Delete
Name: GROOMS, FREDDIE L
Address: 1083 LASCALA DRIVE
City-St-Zip: WINDERMERE, FL 34786 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MCCALLA-WATSON, RENEE
Address: 501 N. ORLANDO AVE. 313-186
City-St-Zip: WINTER PARK, FL 32789 US

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: RENEE MCCALLA-WATSON

MP

04/28/2009

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