

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086330

FILED
Jun 15, 2009
Secretary of State

Entity Name: SIGNS OF INTERPRETING, LLC

Current Principal Place of Business:

12203 MOOSE HOLLOW DRIVE
JACKSONVILLE, FL 32226 US

New Principal Place of Business:

Current Mailing Address:

12203 MOOSE HOLLOW DRIVE
JACKSONVILLE, FL 32226 US

New Mailing Address:

FEI Number: 83-0413198 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:

Name and Address of New Registered Agent:

ROBERSON, LEN
12203 MOOSE HOLLOW DRIVE
JACKSONVILLE, FL 32226 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

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ROBERSON, LEN
Address: 12203 MOOSE HOLLOW DRIVE
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: MGRM () Delete
Name: SIMON, SHANNON
Address: 25 FERROL ROAD
City-St-Zip: ST. AUGUSTINE, FL 32084 US

Title: MGRM (X) Delete
Name: DILEY, BRENDA
Address: 1228 SUMMIT OAKS DRIVE, W
City-St-Zip: JACKSONVILLE, FL 32221 US

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: LEN ROBERSON

MGRM

06/15/2009

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