

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jul 06, 2009  
Secretary of State**

DOCUMENT# L05000015556

Entity Name: PORT ORANGE SALES, LLC

**Current Principal Place of Business:**

**New Principal Place of Business:**

5887 SOUTH RIDGEWOOD AVE.  
PORT ORANGE, FL 32127

**Current Mailing Address:**

**New Mailing Address:**

P.O. BOX 291425  
PORT ORANGE, FL 32129

FEI Number: 20-2405735      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:**

FERRIS, LOUIS J  
5891 RIDGEWOOD AVENUE  
PORT ORANGE, FL 32127      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:**

**ADDITIONS/CHANGES:**

Title: MGR      ( ) Delete  
Name: FERRIS, LOUIS J  
Address: 5891 RIDGEWOOD AVE  
City-St-Zip: PORT ORANGE, FL 32127

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: LOUIS FERRIS

P

07/06/2009

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