

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000038681

Entity Name: A & R ADVENTURES, LLC

FILED
May 03, 2009
Secretary of State

Current Principal Place of Business:

12445 US HWY 301
DADE CITY, FL 33525

New Principal Place of Business:

Current Mailing Address:

12445 US HWY 301
DADE CITY, FL 33525

New Mailing Address:

FEI Number: 03-0569641 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:

ALTMAN, ALLEN
12445 US HWY 301
DADE CITY, FL 33525 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: RAIRLIGH, RAYMOND L SR
Address: 13625 NORTH FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33613

Title: MGRM () Delete
Name: ALTMAN, H. ALLEN JR.
Address: 12445 U.S. HIGHWAY 301
City-St-Zip: DADE CITY, FL 33525

ADDITIONS/CHANGES:

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: ALLEN ALTMAN

MGRM

05/03/2009

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