

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000054787

Entity Name: J. ADAM ANNAND LLC

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

49 LIVE OAK LN.
CRAWFORDVILLE, FL 32327 US

New Principal Place of Business:

Current Mailing Address:

49 LIVE OAK LN.
CRAWFORDVILLE, FL 32327 US

New Mailing Address:

FEI Number: 20-4680119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANNAND, JOHN A
49 LIVE OAK LN.
CRAWFORDVILLE, FL 32327 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: MR. () Delete
Name: ANNAND, J. ADAM A
Address: 49 LIVE OAK LN.
City-St-Zip: CRAWFORDVILLE, FL 32327 US

ADDITIONS/CHANGES:

Title: MR. (X) Change () Addition
Name: ANNAND, JOHN A
Address: 49 LIVE OAK LN.
City-St-Zip: CRAWFORDVILLE, FL 32327 US

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: J. ADAM ANNAND

MR

04/15/2009

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