

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000055106

FILED
Apr 29, 2009
Secretary of State

Entity Name: BIG FISH OF FLORIDA, LLC

Current Principal Place of Business:

151 E HIGHLAND BLVD
STE 161
INVERNESS, FL 34452

New Principal Place of Business:

Current Mailing Address:

PO BOX 635
INVERNESS, FL 34451

New Mailing Address:

FEI Number: 20-3027303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOVACH, MICHAEL T JR ESQ
C/O KOVACH & ASSOCIATES, P.A.
151 E HIGHLAND BLVD, STE 161
INVERNESS, FL 34452 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: KOVACH, MICHAEL T JR
Address: 151 E HIGHLAND BLVD STE 161
City-St-Zip: INVERNESS, FL 34452

Title: MGR () Delete
Name: KOVACH, LAURA M
Address: 7448 E SAVANNAH DR
City-St-Zip: FLORAL CITY, FL 34436

Title: MGR () Delete
Name: SECONI, TREVOR
Address: 2220 HIGHWAY 44 WEST
City-St-Zip: INVERNSS, FL 34453

Title: MGR () Delete
Name: JOACHIM, ANGELA
Address: 6022 E SLATE
City-St-Zip: INVERNESS, FL 34453

Title: MGR () Delete
Name: BERNBERG, SCOTT
Address: 2728 ABBEY GROVE DR
City-St-Zip: VALRICO, FL 33594

Title: MGR () Delete
Name: ROTELLA, CHRISTOPHER
Address: 22909 YARN COURT
City-St-Zip: LAND O'LAKES, FL 34639

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: KOVACH, LAURA M
Address: 324 N OSCEOLA AVE
City-St-Zip: INVERNESS, FL 34450

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL T KOVACH JR

MGMR

04/29/2009

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