

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000057913

FILED  
May 05, 2009  
Secretary of State

Entity Name: STRAIGHT EDGE TRIM LLC

**Current Principal Place of Business:**

389 CASUARINA CIRCLE  
SAINT AUGUSTINE, FL 32086 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1624  
SAINT AUGUSTINE, FL 32085 FL

**New Mailing Address:**

FEI Number: 20-2979883      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:**

VREELAND, TIFFANY M  
389 CASUARINA CIR  
SAINT AUGUSTINE, FL 32086 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: VREELAND, SCOTT W  
Address: 389 CASUARINA CIR.  
City-St-Zip: SAINT AUGUSTINE, FL 32086 US

**ADDITIONS/CHANGES:**

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: TIFFANY VREELAND

MGRM

05/05/2009

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