

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000061628

FILED  
Sep 13, 2009  
Secretary of State

**Entity Name:** THE MCPHEE COMPANY, LLC

**Current Principal Place of Business:**

3381 CRESCENT OAKS BLVD  
TARPON SPRINGS, FL 34688 US

**New Principal Place of Business:**

**Current Mailing Address:**

3381 CRESCENT OAKS BLVD  
TARPON SPRINGS, FL 34688 US

**New Mailing Address:**

**FEI Number:** ☐ **FEI Number Applied For ( )** ☐ **FEI Number Not Applicable (X)** ☐ **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:**

MCPHEE, GORDON  
3381 CRESCENT OAKS BLVD  
TARPON SPRINGS, FL 34688 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: MGR ( ) Delete  
Name: MCPHEE, GORDON  
Address: 3381 CRESCENT OAKS BLVD  
City-St-Zip: TARPON SPRINGS, FL 34688 US

Title: MGR ( ) Delete  
Name: MCPHEE, ELVA  
Address: 3381 CRESCENT OAKS BLVD  
City-St-Zip: TARPON SPRINGS, FL 34688 US

**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: GORDON MCPHEE

MGR

09/13/2009

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