

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068377

Entity Name: MAID CONNECTION, LLC

FILED
Mar 15, 2009
Secretary of State

Current Principal Place of Business:

13542 N. FLORIDA AVE
#208
TAMPA, FL 33613

New Principal Place of Business:

13542 N. FLORIDA AVE
#218
TAMPA, FL 33613

Current Mailing Address:

13542 N. FLORIDA AVE
#208
TAMPA, FL 33613

New Mailing Address:

13542 N. FLORIDA AVE
#218
TAMPA, FL 33613

FEI Number: 20-3134981

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLS, DEREK E SR
13542 N. FLORIDA AVE
#208
TAMPA, FL 33613 US

Name and Address of New Registered Agent:

WELLS, DEREK E SR
13542 N. FLORIDA AVE
#218
TAMPA, FL 33613 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:

03/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WELLS, DEREK E SR.
Address: 13542 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33613

Title: MGR () Delete
Name: WELLS, LINDA J
Address: 13542 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33613

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: DEREK WELLS

MGR

03/15/2009

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