

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000077954

FILED
Apr 27, 2009
Secretary of State

Entity Name: AARON BRYANT ENTERPRISES LLC

Current Principal Place of Business:

5317 FRUITVILLE RD.
UNIT 128
SARASOTA, FL 34232 US

New Principal Place of Business:

5505 BAHIA VISTA ST.
SARASOTA, FL 34232 US

Current Mailing Address:

5317 FRUITVILLE RD.
UNIT 128
SARASOTA, FL 34232 US

New Mailing Address:

5505 BAHIA VISTA
SARASOTA, FL 34232 US

FEI Number: 20-3272775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRYANT, GEORGE A
3505 HACIENDA ST.
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

BRYANT, GEORGE A
5505 BAHIA VISTA ST.
SARASOTA, FL 34232 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:

04/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRYANT, GEORGE A
Address: 16120 RAWLS RD
City-St-Zip: SARASOTA, FL 34240

Title: ST () Delete
Name: BRYANT, MADELINE E
Address: 16120 RAWLS RD
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BRYANT, GEORGE A
Address: 5505 BAHIA VISTA ST.
City-St-Zip: SARASOTA, FL 34240

Title: ST (X) Change () Addition
Name: BRYANT, MADELINE E
Address: 5505 BAHIA VISTA
City-St-Zip: SARASOTA, FL 34240

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: GEORGE A. BRYANT

MGMR

04/27/2009

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