

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079208

Entity Name: ESTATE LOGIC, LLC

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

5608 PINNACLE HEIGHTS CIRCLE, STE 107
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

5608 PINNACLE HEIGHTS CIRCLE, STE 107
TAMPA, FL 33624

New Mailing Address:

FEI Number: 20-3263433

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, VINCE E
5414 DEERBROOKE CREEK CIRCLE
#28
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

DAVIS, VINCE E
5608 PINNACLE HEIGHTS CIRCLE
107
TAMPA, FL 33624 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: VINCE E DAVIS

04/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DAVIS, VINCE E
Address: 5414 DEERBROOKE CREEK CIRCLE, #28
City-St-Zip: TAMPA, FL 33624

Title: MGRM () Delete
Name: DAVIS, CAROLINE M
Address: 5414 DEERBROOKE CREEK CIRCLE, #28
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DAVIS, VINCE E
Address: 5608 PINNACLE HEIGHTS CIRCLE, #107
City-St-Zip: TAMPA, FL 33624

Title: MGRM (X) Change () Addition
Name: DAVIS, CAROLINE M
Address: 5608 PINNACLE HEIGHTS CIRCLE, #107
City-St-Zip: TAMPA, FL 33624

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: VINCE E DAVIS

CEO

04/21/2009

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