

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000083218

Entity Name: SS ENTERPRISES, LLC

FILED
Jun 16, 2009
Secretary of State

Current Principal Place of Business:

35 CORD ROAD
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

35 CORD ROAD
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 56-2527412 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:

SHACKLEY, SCOTT
35 CORD ROAD
SANTA ROSA BEACH, FL 32459 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: SHACKLEY, SCOTT
Address: 35 CORD ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM () Delete
Name: SULTUSKA, GREG
Address: 523 WOODLAND BAYOU
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM (X) Delete
Name: ALEXANDER, RICKY
Address: 212 BRADLEY DR
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SCOTT SHACKLEY

MGRM

06/16/2009

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