

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000085258

Entity Name: JOY PLAZA, LLC

FILED  
Apr 29, 2009  
Secretary of State

**Current Principal Place of Business:**

8383 OMAHA CIRCLE  
SPRING HILL, FL

**New Principal Place of Business:**

**Current Mailing Address:**

22303 SKYVIEW CIRCLE  
BROOKSVILLE, FL 34602

**New Mailing Address:**

FEI Number: 20-3374901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BENSON, JUAH T  
22303 SKYVIEW CIRCLE  
BROOKSVILLE, FL 34602 US

**Name and Address of New Registered Agent:**

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: BENSON, JUAH T  
Address: 22303 SKYVIEW BLVD.  
City-St-Zip: BROOKSVILLE, FL 34602

Title: MGR ( ) Delete  
Name: BENSON, MUNAH C  
Address: 155 CALEBS PATH  
City-St-Zip: BRENTWOOD, NY 11717

Title: MGR ( ) Delete  
Name: BENSON, MCFRED C  
Address: 14064 BRUNAI DRIVE  
City-St-Zip: SPRING HILL, FL 34609

**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: JUAH BENSON

MGRM

04/29/2009

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