

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096145

Entity Name: 3/4 TIME, LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

1025 COUNTY RD 17 NORTH
LAKE PLACID, FL 33852

New Principal Place of Business:

1025 COUNTY ROAD 17 NORTH
LAKE PLACID, FL 33852

Current Mailing Address:

1025 COUNTY RD 17 NORTH
LAKE PLACID, FL 33852

New Mailing Address:

1025 COUNTY ROAD 17 NORTH
LAKE PLACID, FL 33852

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMOAK, MASON G
1025 COUNTY RD 17 NORTH
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

SMOAK, JOHN F III
1025 COUNTY ROAD 17 NORTH
LAKE PLACID, FL 33852 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: JOHN F. SMOAK III

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SMOAK, MASON G
Address: 1025 COUNTY RD 17 NORTH
City-St-Zip: LAKE PLACID, FL 33852

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SMOAK, JOHN F III
Address: 1025 COUNTY ROAD 17 NORTH
City-St-Zip: LAKE PLACID, FL 33852

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: JOHN F. SMOAK III

MGRM

04/30/2009

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