## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000105077

Entity Name: PAPAU, LLC

Address:

City-St-Zip:

FILED Feb 02, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 835 EYELYNTOP LOOP THE VILLAGES, FL 32162 **Current Mailing Address: New Mailing Address:** 835 EVELYNTON LOOP THE VILLAGES, FL 32162 FEI Number: 20-3671736 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WEAVER, DAVID 835 EYELYNTOP LOOP THE VILLAGES, FL 32162 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: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition WEAVER, DAVID Name: Name: Address: 835 EVELYNTON LOOP Address: City-St-Zip: THE VILLAGES, FL 32162 City-St-Zip: Title: ( ) Delete Title: TRES ( ) Change (X) Addition Name: Name: WEAVER, PATRICA

Address:

City-St-Zip:

835 EVELYNTON LOOP

THE VILLAGES, FL 32162

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: DAVID WEAVER MGRM 02/02/2009