

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000110351

FILED
May 01, 2009
Secretary of State

Entity Name: GREYSTOKE HURRICANE PROTECTION LLC

Current Principal Place of Business:

8799 NW 99TH STREET
MEDLEY, FL 331781469

New Principal Place of Business:

Current Mailing Address:

8799 NW 99TH STREET
MEDLEY, FL 331781469

New Mailing Address:

FEI Number: 20-3793040 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:

BLAZQUEZ, GUSTAVO
8799 NW 99TH STREET
MEDLEY, FL 33178 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: MGR () Delete
Name: BLAZQUEZ, GUSTAVO
Address: 10251 NW 52ND TERRACE
City-St-Zip: DORAL, FL 33178

Title: MGR () Delete
Name: BLAZQUEZ, PEDRO
Address: 10251 NW 52ND TERRACE
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES:

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: GUSTAVO BLAZQUEZ

MGR

05/01/2009

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