2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# L05000115123

Entity Name: ALLISON MEWS, LLC

Current Principal Place of Business:

410 SOUTH WARE BLVD
SUITE 303
TAMPA, FL 33619 US

New Principal Place of Business:

Current Mailing Address:

410 SOUTH WARE BLVD
SUITE 303
TAMPA, FL 33619 US

New Mailing Address:

FEI Number: 20-3871792 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MANDT, JOSEPH
3735 OVERLOOK DRIVE
ST PETERSBURG, FL 33703 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: MANDT, JOSEPH
Address: 3735 OVERLOOK DRIVE
City-St-Zip: ST PETERSBURG, FL 33703 US

Title: MGRM ( ) Delete
Name: BLUE MARLIN DEVELOPM, ENT PARTNERS, L LC
Address: 410 SOUTH WARE BLVD, SUITE 303
City-St-Zip: TAMPA, FL 33619 US

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: JOSEPH D MANDT MGRM 01/14/2009

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