2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Feb 08, 2008 08:00 AN DOCUMENT # L05000116134 **Secretary of State** 1. Entity Name PIONEER PARTNERS LLC Principal Place of Business Mailing Address 1111 RIVER ROAD 1111 RIVER ROAD MELBOURNE BEACH, FL 32951 MELBOURNE BEACH, FL 32951 02062008 No Chg-LLC CR2E083 (12/07) 4. FEI Number Applied For 42-1695179 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BAIRD, CHARLES A 1111 RIVER ROAD MELBOURNE BEACH, FL 32951 **IN THIS SPACE** 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title d applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/MANAGERS **MGRM** TITLE BAIRD, CHARLES A NAME STREET ADDRESS 1111 RIVER ROAD CITY-ST-ZIP MELBOURNE BEACH, FL 32951 TITLE MGR JACOBS, JOANN NAME U00000821352 STREET ADDRESS 410 THRUSH DRIVE CITY-ST-ZIP SATELLITE BEACH, FL 32937 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TOLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

FILED

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Casal Charles A. Baird 2-5-08 6173