2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 09, 2009
Secretary of State

DOCUMENT# L06000012297

Entity Name: STEVEN LYNG, LLC

Current Principal Place of Business:

1807 TWELVE OAKS NORTH
NEPTUNE BEACH, FL 32266

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 50093
JACKSONVILLE BEACH, FL 32240

New Mailing Address:

FEI Number: 20-4273597 **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:

LYNG, STEVEN S
1807 TWELVE OAKS NORTH
NEPTUNE BEACH, FL 32266 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:	LYNG, STEVEN S
Address:	PO BOX 50093
City-St-Zip:	JACKSONVILLE BEACH, FL 322400093

ADDITIONS/CHANGES:

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: STEVEN S LYNG MRGM 05/09/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date