

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000025126

FILED
Apr 21, 2009
Secretary of State

Entity Name: MATTRESS RETAIL OUTLETS, LLC

Current Principal Place of Business:

8930 N. DAVIS HWY
PENSACOLA, FL 32514 US

New Principal Place of Business:

Current Mailing Address:

8930 N. DAVIS HWY
PENSACOLA, FL 32514 US

New Mailing Address:

FEI Number: 20-4461157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNER, THOMAS D
1114 WAVERLY WAY
TALLAHASSEE, FL 32312 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: MGR () Delete
Name: CONNER, MIKE T
Address: 1867 WAREHAM WAY
City-St-Zip: CANTONMENT, FL 32533 US

Title: MGRM () Delete
Name: CONNER, STEVEN W
Address: 276 WHETHERBINE WAY
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: MGRM () Delete
Name: CONNER, THOMAS D
Address: 1114 WAVERLY RD
City-St-Zip: TALLAHASSEE, FL 32312 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: CONNER, STEVEN W
Address: 1020 MERRITT DRIVE
City-St-Zip: TALLAHASSEE, FL 32301 US

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: T D CONNER

MGRM

04/21/2009

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