2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000034174

Entity Name: LEBEAUX LLC

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14286-19 BEACH BLVD.

136

JACKSONVILLE, FL 32250 US

New Mailing Address: Current Mailing Address:

14286-19 BEACH BLVD.

JACKSONVILLE, FL 32250 US

FEI Number: 20-2212011 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:

LEBEAUX, KELVIN P LEBEAUX, KELVIN P 3875 SAN PABLO RD S 9378 ARLINGTON EXPY

1024

113 JACKSONVILLE, FL 32224 US JACKSONVILLE, FL 32225 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: KELVIN LEBEAUX 05/01/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

MGRM Title: MGRM (X) Change () Addition () Delete LEBEAUX, KELVIN P LEBEAUX, KELVIN P Name: Name:

3875 SAN PABLO RD S #1024 Address: 9378 ARLINGTON EXPY #113 Address: City-St-Zip: JACKSONVILLE, FL 32224 US City-St-Zip: JACKSONVILLE, FL 32225 US

(X) Change () Addition Title: MGRM () Delete Title: MGR

Name: LEBEAUX, JOANN F Name: MINOR, ETHEL M

Address: 3875 SAN PABLO RD S #1024 Address: 23540 COTTONWAY PKWY City-St-Zip: JACKSONVILLE, FL 32224 US City-St-Zip: CALIFORNIA, MD 20619 US

Title: () Delete Title: MGR () Change (X) Addition

OWENS, CARLOS Name: Name: Address: Address: P.O. BOX 871508 City-St-Zip: City-St-Zip: WASILLA, AK 99687

Title: () Delete Title: MGR () Change (X) Addition

Name: Name: LEBEAUX, NICOLE Address: Address: 807 THAYER AVE City-St-Zip: City-St-Zip: SILVER SPRING, MD 20910

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: KELVIN LEBEAUX **MGRM** 05/01/2009