

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036997

Entity Name: CEPA HOLDINGS, LLC

FILED  
Apr 28, 2009  
Secretary of State

**Current Principal Place of Business:**

1418 SW BROADVIEW ST.  
PORT ST. LUCIE, FL 34983

**New Principal Place of Business:**

1595 STATE ROAD 70 EAST  
OKEECHOBEE, FL 34972

**Current Mailing Address:**

1418 SW BROADVIEW ST.  
PORT ST. LUCIE, FL 34983

**New Mailing Address:**

1595 STATE ROAD 70 EAST  
OKEECHOBEE, FL 34972

FEI Number: 20-4706854

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOONE, PATRICIA  
1418 SW BROADVIEW STREET  
PORT SAINT LUCIE, FL 34983 US

**Name and Address of New Registered Agent:**

BOONE, PATRICIA  
1595 STATE ROAD 70 EAST  
OKEECHOBEE, FL 34972 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: PATRICIA BOONE

04/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BOONE, PATRICIA A  
Address: 1418 SW BROADVIEW ST.  
City-St-Zip: PORT ST. LUCIE, FL 34983

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BOONE, PATRICIA A  
Address: 1595 STATE ROAD 70 EAST  
City-St-Zip: OKEECHOBEE, FL 34972

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: PATRICIA BOONE

MGR

04/28/2009

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