

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037194

Entity Name: THE DAVIDS FAMILY LLC

FILED
May 06, 2009
Secretary of State

Current Principal Place of Business:

429 WILLOWBROOK LANE
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

429 WILLOWBROOK LANE
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 20-4660300 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:

DAVIDS, DEBRA L
2300 MAITLAND CENTER PARKWAY
SUITE 140
MAITLAND, FL 32751 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DAVIDS, DEBRA
Address: 429 WILLOWBROOK LANE
City-St-Zip: LONGWOOD, FL 3277

Title: MGRM () Delete
Name: DAVIDS, MARK
Address: 429 WILLOWBROOK LANE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES:

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

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: DEBRA L. DAVIDS

MGM

05/06/2009

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