

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047000

FILED
Apr 30, 2009
Secretary of State

Entity Name: AXCESS DEVELOPMENT LLC

Current Principal Place of Business:

346 SE EVERGREEN DR
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

346 SE EVERGREEN DR
LAKE CITY, FL 32025

New Mailing Address:

PO BOX 1213
LAKE CITY, FL 320561213

FEI Number: 20-4824299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMPSON, CHRISTOPHER T
346 SE EVERGREEN DR
LAKE CITY, FL 32025 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: SAMPSON, CHRISTOPHER T
Address: 346 SE EVERGREEN DR
City-St-Zip: LAKE CITY, FL 32024

Title: MGRM () Delete
Name: MOORE, KENNETH L
Address: 284 ALPAT DR
City-St-Zip: DILLSBURG, PA 17019

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: CHRISTOPHER T SAMPSON

MGRM

04/30/2009

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