

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000048765

Entity Name: CHOPPER CITY USA, LLC

FILED
Jun 20, 2008
Secretary of State

Current Principal Place of Business:

120 COLLEGE DR UNIT A
ORANGE PARK, FL 32065

New Principal Place of Business:

Current Mailing Address:

120 COLLEGE DR UNIT A
ORANGE PARK, FL 32065

New Mailing Address:

FEI Number: 20-4776042

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASCANTE, ROGER F
811 SWINFORD CT
ORANGE PARK, FL 32065 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: CASCANTE, ROGER F
Address: 811 SWINFORD CT
City-St-Zip: ORANGE PARK, FL 32065

Title: MGRM () Delete
Name: WELCH, DAVID E
Address: 6371 COLLINS RD APT 108
City-St-Zip: JACKSONVILLE, FL 32244

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: WELCH, DAVID E
Address: 1764 PICKWICK PL
City-St-Zip: ORANGE PARK, FL 32003

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: DAVID WELCH

MGRM

06/20/2008

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