

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000052318

FILED  
Mar 14, 2009  
Secretary of State

**Entity Name:** TOPSAIL COMMERCIAL HOLDINGS, LLC

**Current Principal Place of Business:**

6511 HWY 30-A  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

6511 HWY 30-A WEST  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

6511 HWY 30-A  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

6511 HWY 30-A WEST  
SANTA ROSA BEACH, FL 32459

**FEI Number:** 20-8345938

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PAULS, ALICE  
6511 HWY 30-A  
SANTA ROSA BEACH, FL 32459 US

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

PAULS, ALICE  
6511 HWY 30-A WEST  
SANTA ROSA BEACH, FL 32459 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: ALICE PAULS

03/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: PAULS, ALICE  
Address: 6511 HWY 30-A  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGR ( ) Delete  
Name: PAULS, TIM  
Address: 6511 HWY 30-A  
City-St-Zip: SANTA ROSA BEACH, FL 32459

**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: ALICE PAULS

MGR

03/14/2009

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