## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000054046

15036 FOX BRANCH LANE

City-St-Zip: MIDLOTHIAN, VA 23112

Address:

Entity Name: LIDOJOST, LLC

FILED Jan 05, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
35 BECKE PALM CO	T LANE AST, FL 3213	7		
Current Mailing Address:			New Mailing Address:	
35 BECKE PALM CO	T LANE AST, FL 3213	7		
FEI Number	: 20-4974441	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of (	Current Registered Agent:	Name and Address	s of New Registered Agent:
595 WEST	, SCOTT E GRANADA E BEACH, FL 3	BLVD., SUITE A 32174 US		
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registe	red office or registered agent, or both
SIGNATUI	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM ( FORTE, JOSE 35 BECKET LA PALM COAST,	ANE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM ( FORTE, STEVI 15036 FOX BE MIDLOTHIAN,	RANCH LANE	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition
Title: Name: Address: City-St-Zip:	MGRM ( FORTE, DORA 35 BECKET LA PALM COAST,	ANE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	MGRM ( FORTE, LISA	) Delete	Title: Name:	( ) Change ( ) Addition

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.

Address:

City-St-Zip:

SIGNATURE: JOSEPH A. FORTE MGRM 01/05/2009