2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000059449

Entity Name: MAPES LLC

Current Principal Place of Business:	**New Principal Place of Business:**
1073 CORKWOOD DR OVIEDO, FL 32765	690 MACGLENROSS DR OVIEDO, FL 32765

Current Mailing Address:	**New Mailing Address:**
1073 CORKWOOD DR OVIEDO, FL 32765	PO BOX 622501 OVIEDO, FL 327622501

FEI Number: 20-5066971   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
MAPES, JEREMY P 1073 CORKWOOD DR OVIEDO, FL 32765 US	MAPES, JEREMY P 690 MACGLENROSS DR OVIEDO, FL 32765 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: JEREMY P MAPES   03/01/2009

                  Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Name: MAPES, JEREMY P Address: 1073 CORKWOOD DR City-St-Zip: OVIEDO, FL 32765	Title: MGRM (X) Change ( ) Addition Name: MAPES, JEREMY P Address: 690 MACGLENROSS DR City-St-Zip: OVIEDO, FL 32765
Title: MGRM ( ) Delete Name: MAPES, MARJORIE L Address: 1073 CORKWOOD DR City-St-Zip: OVIEDO, FL 32765	Title: MGRM (X) Change ( ) Addition Name: MAPES, MARJORIE L Address: 690 MACGLENROSS DR City-St-Zip: OVIEDO, FL 32765

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: JEREMY P MAPES   MGRM   03/01/2009

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