

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000067730

Entity Name: NEVERDUNN LLC

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

929 SW OLD WIRE RD
LAKE CITY, FL 32024 US

New Principal Place of Business:

Current Mailing Address:

929 SW OLD WIRE RD
LAKE CITY, FL 32024 US

New Mailing Address:

FEI Number: 74-3189761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENTS LEGAL SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 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: BEAKES, DAVID C
Address: 929 SW OLD WIRE RD
City-St-Zip: LAKE CITY, FL 32024 US

Title: MGRM () Delete
Name: FREEMAN, CHRISTEL L
Address: 903 SW OLD WIRE RD
City-St-Zip: LAKE CITY, FL 32024 US

Title: MGRM () Delete
Name: BEAKES, SANDRA L
Address: 929 SW OLD WIRE RD
City-St-Zip: LAKE CITY, FL 32024 US

Title: MGRM () Delete
Name: FREEMAN, BRIAN
Address: 903 SW OLD WIRE RD
City-St-Zip: LAKE CITY, FL 32024 US

Title: MGRM () Delete
Name: DUNN, LORINE
Address: 4155 COQUINA AVE
City-St-Zip: TITUSVILLE, FL 32780 US

ADDITIONS/CHANGES:

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

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

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

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: DAVID C BEAKES

CEO

03/20/2009

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