

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000070657

FILED
Mar 17, 2009
Secretary of State

Entity Name: MOORE'S CREATIVE SOLUTIONS, LLC

Current Principal Place of Business:

2740 N. HARBOR CITY BLVD.
MELBOURNE, FL 32935

New Principal Place of Business:

6786 ARROYO DR.
MELBOURNE, FL 32940

Current Mailing Address:

2740 N. HARBOR CITY BLVD.
SUITE #5
MELBOURNE, FL 32935

New Mailing Address:

6786 ARROYO DR.
MELBOURNE, FL 32940

FEI Number: 20-5209966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELMAN, ERIC
2740 N. HARBOR CITY BLVD.
SUITE #5
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

GELMAN, ERIC
6786 ARROYO DR.
MELBOURNE, FL 32940 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:

03/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GELMAN, ERIC
Address: 2740 N. HARBOR CITY BLVD.
City-St-Zip: MELBOURNE, FL 32935

Title: MGR () Delete
Name: GELMAN, TERRI M
Address: 2740 N. HARBOR CITY BLVD.
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GELMAN, ERIC
Address: 6786 ARROYO DR.
City-St-Zip: MELBOURNE, FL 32940

Title: MGR (X) Change () Addition
Name: GELMAN, TERRI M
Address: 6786 ARROYO DR.
City-St-Zip: MELBOURNE, FL 32940

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: ERIC GELMAN

MGR

03/17/2009

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