

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089391

FILED
Feb 25, 2009
Secretary of State

Entity Name: AGRUSA ENTERPRISES, LLC

Current Principal Place of Business:

800 EAGLE WAY
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

800 EAGLE WAY
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

FEI Number: 26-0757536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, ROBERT P
8295 N. MILITARY TRAIL
SUITE A
PALM BEACH GARDENS, FL 33410 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: MGR () Delete
Name: AGRUSA, ANTHONY F SR.
Address: 142 EBBTIDE DR.
City-St-Zip: NORTH PALM BEACH, FL 33403 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: AGRUSA, ANTHONY F SR.
Address: 142 EBBTIDE DR.
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: MGRM () Change (X) Addition
Name: AGRUSA, LOUIS
Address: 142 EBBTIDE DRIVE
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: MGRM () Change (X) Addition
Name: AGRUSA, ANTHONY F JR
Address: 800 EAGLE WAY
City-St-Zip: NORTH PALM BEACH, FL 33408 US

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: ANTHONY AGRUSA

MGR

02/25/2009

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