

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000090056

FILED
Apr 14, 2009
Secretary of State

Entity Name: AMPLIFY LLC

Current Principal Place of Business:

11818 MARBLEHEAD DRIVE
TAMPA, FL 33626

New Principal Place of Business:

Current Mailing Address:

11818 MARBLEHEAD DRIVE
TAMPA, FL 33626

New Mailing Address:

FEI Number: 20-5564595 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNIGHT, LISA R
13242 EMERALD ACRES AVE
DOVER, FL 33527 US

Name and Address of New Registered Agent:

KNIGHT, LISA R
2331 TANBARK RIDGE PLACE
PLANT CITY, FL 33563 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: _____

04/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FAGAN, LISA J
Address: 11818 MARBLEHEAD DRIVE
City-St-Zip: TAMPA, FL 33626

Title: MGRM () Delete
Name: TRUEBLOOD, JOE
Address: 1916 COTTON MILL DRIVE
City-St-Zip: MCKINNEY, TX 75070

ADDITIONS/CHANGES:

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: LISA FAGAN

MGRM

04/14/2009

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