

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000103376

Entity Name: ONE, LLC

FILED  
Mar 23, 2009  
Secretary of State

## Current Principal Place of Business:

2563 N ATLANTIC AVENUE  
DAYTONA BEACH, FL 32118

## New Principal Place of Business:

## Current Mailing Address:

1607 BASS AVE.  
SEVILLE, FL 32190

## New Mailing Address:

2665 N ATLANTIC AVE  
PO BOX 332  
DAYTONA BEACH, FL 32118

FEI Number: 06-1798006

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LCI TAXES  
904 E. MOODY BLVD  
BUNNELL, FL 32110 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: CRAWFORD, AARON G  
Address: 475 CAROLINE DRIVE  
City-St-Zip: CHILLICOTHE, OH 45601

Title: MGRM ( ) Delete  
Name: CRAWFORD, LETICIA G  
Address: 475 CAROLINE DRIVE  
City-St-Zip: CHILLICOTHE, OH 45601

Title: MGRM ( ) Delete  
Name: BARUXES, GEORGE J  
Address: 1607 BASS AVE.  
City-St-Zip: SEVILLE, FL 32190

Title: MGRM ( ) Delete  
Name: BARUXES, LUCINDA L  
Address: 1607 BASS AVE.  
City-St-Zip: SEVILLE, FL 32190

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: CRAWFORD, AARON G  
Address: 2 MOONGLOW DR  
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM (X) Change ( ) Addition  
Name: CRAWFORD, LETICIA G  
Address: 2 MOONGLOW DR  
City-St-Zip: ORMOND BEACH, FL 32174

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: LETICIA G CRAWFORD

MGRM

03/23/2009

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