

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000107068

FILED
May 15, 2009
Secretary of State

Entity Name: HIGHER GROUND PUBLISHING LLC

Current Principal Place of Business:

4905 WILD GRAPE WAY
MELBOURNE, FL 32940 US

New Principal Place of Business:

Current Mailing Address:

4905 WILD GRAPE WAY
MELBOURNE, FL 32940 US

New Mailing Address:

FEI Number: 87-0787788 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FISICHELLA, ANTHONY JR.
4905 WILD GRAPE WAY
MELBOURNE, FL 32940 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: FISICHELLA, DOUGLAS J
Address: 6929 SOUTH DELAWARE ST
City-St-Zip: LITTLETON, CO 80120 US

Title: MGRM () Delete
Name: FISICHELLA, ANTHONY JR.
Address: 4905 WILD GRAPE WAY
City-St-Zip: MELBOURNE, FL 32940 US

Title: MGRM () Delete
Name: HENDRICKSON, DORIS A
Address: 155 ST DAVID'S WAY
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGRM () Delete
Name: FISICHELLA, JEANNE MARIE
Address: 4905 WILD GRAPE WAY
City-St-Zip: MELBOURNE, FL 32940 US

Title: MGRM () Delete
Name: FISICHELLA, CHRISTINE
Address: 4905 WILD GRAPE WAY
City-St-Zip: MELBOURNE, FL 32940 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: ANTHONY FISICHELLA

MGRM

05/15/2009

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