2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2009
Secretary of State

DOCUMENT# L06000108868

Entity Name: 44TH AVENUE N., LLC

Current Principal Place of Business:

1900 MONTANA AVE. NORTHEAST
ST. PETERBURG, FL 33703

New Principal Place of Business:

Current Mailing Address:

1900 MONTANA AVE. NORTHEAST
ST. PETERBURG, FL 33703

New Mailing Address:

FEI Number: 20-5870480 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

O'CONNOR, PATRICK M ESQ.
C/O O'CONNOR & ASSOCIATES
1250 S. BECLCHER ROAD, SUITE 160
LAROG, FL 33771 US

Name and Address of New Registered Agent:

O'CONNOR, PATRICK M ESQ.
C/O O'CONNOR & ASSOCIATES
1250 S. BECLCHER ROAD, SUITE 160
LARGO, FL 33771 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: _____ 04/19/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: O'LEARY, BARBARA
Address: 1900 MONTANA AVE NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: MGR ( ) Delete
Name: O'LEARY, JOHN
Address: 1900 MONTANA AVE NE
City-St-Zip: SAINT PETERSBURG, FL 33703

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: BARBARA O'LEARY MGR 04/19/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date