2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# L06000109639

Entity Name: ALLURE ENTERPRISES, LLC

Current Principal Place of Business:

36643 SPARROW LANE
GRAND ISLAND, FL 32735

New Principal Place of Business:

Current Mailing Address:

36643 SPARROW LANE
GRAND ISLAND, FL 32735

New Mailing Address:

FEI Number: 20-5876101 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, BENJAMIN R
36643 SPARROW LANE
GRAND ISLAND, FL 32735 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:	DAVIS, BENJAMIN R	
Address:	36643 SPARROW LANE	
City-St-Zip:	GRAND ISLAND, FL 32735	
Title:	MGRM	( ) Delete
Name:	DAVIS, KARIE A	
Address:	36643 SPARROW LANE	
City-St-Zip:	GRAND ISLAND, FL 32735	
Title:	MGRM	( ) Delete
Name:	HRITZIK, MICHAEL III	
Address:	10402 BARRINGTON COURT	
City-St-Zip:	LEESBURG, FL 34788	
Title:	MGRM	( ) Delete
Name:	HRITZIK, ALYSA L	
Address:	10402 BARRINGTON COURT	
City-St-Zip:	LEESBURG, FL 34788	

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:	

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: KARIE ANN DAVIS MGRM 04/08/2009

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