

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Mar 10, 2009  
Secretary of State**

DOCUMENT# L06000117696

Entity Name: EDMUND H. BLAKEMAN, LLC

**Current Principal Place of Business:**

769 HAWKS RIDGE ROAD  
PORT ORANGE, FL 32127

**New Principal Place of Business:**

**Current Mailing Address:**

769 HAWKS RIDGE ROAD  
PORT ORANGE, FL 32127

**New Mailing Address:**

FEI Number: 20-8021233      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BLAKEMAN, EDMUND H  
769 HAWKS RIDGE ROAD  
PORT ORANGE, FL 32127      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: MR. ( ) Delete  
Name: BLAKEMAN, EDMUND H PRES.  
Address: 769 HAWKS RIDGE ROAD  
City-St-Zip: PORT ORANGE, FL 32127

**ADDITIONS/CHANGES:**

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: EDMUND BLAKEMAN      MGRM      03/10/2009

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