## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118201

Entity Name: CEBAY, LLC

**FILED** Feb 05, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3901 MONUMENT ROAD 4002 LA VISTA CIRCLE

SUITE 3 JACKSONVILLE, FL 32217 US JACKSONVILLE, FL 32225 US

**New Mailing Address: Current Mailing Address:** 

4320 DEERWOOD LAKE PARKWAY 4002 LA VISTA CIRCLE

101-501 JACKSONVILLE, FL 32217 US JACKSONVILLE, FL 32216

FEI Number: 20-8032288 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MIKOSKY, ANTHONY S MIKOSKY, ANTHONY S 4320 DEERWOOD LAKE PARKWAY 4002 LA VISTA CIRCLE US

JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32216 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: ANTHONY S. MIKOSKY 02/05/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: (X) Change ( ) Addition

PARTNERSHIP CUSTOM H, OMES & REMODEL ING, INC PARTNERSHIP CUSTOM H, OMES & REMODEL I NG, INC Name: Name:

Address: 4320 DEERWOOD LAKE PARKWAY, SUITE 101-501 Address: 4002 LA VISTA CIRCLE City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32217

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 S. MIKOSKY 02/05/2009