

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118263

Entity Name: ATLANTIC COAST VENDING, LLC

FILED
Feb 12, 2009
Secretary of State

Current Principal Place of Business:

249 SCORPION CT.
#3
SATELLITE BEACH, FL 32937 US

New Principal Place of Business:

Current Mailing Address:

115 DESOTO PARKWAY
SATELLITE BEACH, FL 32937 US

New Mailing Address:

FEI Number: 22-3948778

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARRY, CURTIS H PRES
115 DESOTO PARKWAY
SATELLITE BEACH, FL 32937 US

Name and Address of New Registered Agent:

PARRY, CURTIS H MNGR
115 DESOTO PARKWAY
SATELLITE BEACH, FL 32937 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: CURTIS PARRY

02/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PARRY, CURTIS H PRES.
Address: 249 SCORPION CT.
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: S () Delete
Name: PARRY, CURTIS H
Address: 249 SCORPION CT.
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: MGR () Delete
Name: PARRY, SHAWNE VP
Address: 249 SCORPION CT.
City-St-Zip: SATELLITE BEACH, FL 32937

Title: T () Delete
Name: PARRY, SHAWNE
Address: 249 SCORPION CT.
City-St-Zip: SATELLITE BEACH, FL 32937

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PARRY, CURTIS H MNGR
Address: 249 SCORPION CT.
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: S (X) Change () Addition
Name: PARRY, CURTIS H MNGR
Address: 249 SCORPION CT.
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: MGR (X) Change () Addition
Name: PARRY, SHAWNE MNGR
Address: 249 SCORPION CT.
City-St-Zip: SATELLITE BEACH, FL 32937

Title: T (X) Change () Addition
Name: PARRY, SHAWNE MNGR
Address: 249 SCORPION CT.
City-St-Zip: SATELLITE BEACH, FL 32937

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: CURTIS PARRY

MNGR

02/12/2009

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