2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 13, 2009
Secretary of State

DOCUMENT# L06000122210

Entity Name: SS & P, L.L.C.

Current Principal Place of Business:

3549 SMYER DRIVE
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

3549 SMYER DRIVE
PACE, FL 32571

New Mailing Address:

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

Name and Address of Current Registered Agent:

KERRY ANNE SCHULTZ, ESQUIRE
2721 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 US

Name and Address of New Registered Agent:

KERRY ANNE SCHULTZ, ESQUIRE
2045 FOUNTAIN PROFESSIONAL COURT
SUITE A
NAVARRE, FL 32566 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: KERRY ANNE SCHULTZ, ESQUIRE 01/13/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: WILSON, WILLIAM S
Address: 3549 SMYER DRIVE
City-St-Zip: PACE, FL 32571

Title: MGRM ( ) Delete
Name: WILSON, KENNETH S
Address: 3551 SMYER DRIVE
City-St-Zip: PACE, FL 32571

Title: MGRM ( ) Delete
Name: WILSON, JOSEPH P
Address: 3549 SMYER DRIVE
City-St-Zip: PACE, FL 32571

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:

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: WILLIAM S. WILSON MGR 01/13/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date