

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000022419

Entity Name: ANGEL'S HANDS L.L.C.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

599 SHERWOOD AVE, UNIT 208
SATELLITE BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

599 SHERWOOD AVE, UNIT 208
SATELLITE BEACH, FL 32937

New Mailing Address:

FEI Number: 87-0796486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AUDIO VISUAL IMAGINEERING, INC.
8440 TRADEPORT DR., SUITE 109
ORLANDO, FL 32827 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: MGR () Delete
Name: BAUR, DAVIDA ANN
Address: 599 SHERWOOD AVE, UNIT 208
City-St-Zip: SATELLITE BEACH, FL 32937

Title: MGR () Delete
Name: YOUNG, JOANNE
Address: 10768 S. TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES:

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: JOANNE YOUNG

MGR

04/27/2009

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