2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000022897

Entity Name: ABOUT TIME NO. 1, LLC

FILED Mar 24, 2009 Secretary of State

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

61 BELL BLVD. UNIT 2 LEHIGH ACRES, FL 33936

Current Mailing Address: New Mailing Address:

 C/O JOHN M. WICKER
 C/O JOHN M. WICKER, P.A.

 P.O. DRAWER 60205
 P.O. DRAWER 60205

 FT. MYERS, FL 33906
 FT. MYERS, FL 33906

FEI Number: 20-8541732 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:

WICKER, JOHN M PA
12670 NEW BRITTANY BLVD.
SUITE 101
FT. MYERS, FL 33907 US

WICKER, JOHN M
12670 NEW BRITTANY BLVD.
SUITE 101
FT. MYERS, FL 33907 US

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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: JOHN M. WICKER 03/24/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 GONZALEZ-TIRADO, CARLOS DVM
 Name:

 Address:
 61 BELL BLVD. UNIT 2
 Address:

 City-St-Zip:
 LEHIGH ACRES, FL 33936
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 BLUM, ERNEST Y
 Name:

 Address:
 61 BELL BLVD. UNIT 2
 Address:

 City-St-Zip:
 LEHIGH ACRES, FL 33936
 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: CARLOS GONZALEZ-TIRADO MGRM 03/24/2009