

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000025125

FILED
Feb 10, 2009
Secretary of State

Entity Name: A1A-ALLIANCE OF CRESENT CITY LLC

Current Principal Place of Business:

158 LAKE STREET
POMONA PARK, FL 32181

New Principal Place of Business:

108 S. 2ND STREET
PALATKA, FL 32177

Current Mailing Address:

P.O. BOX 57
PALATKA, FL 32178

New Mailing Address:

FEI Number: 20-8577047 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN, CINDY S
158 LAKE STREET
POMONA PARK, FL 32181 US

Name and Address of New Registered Agent:

CHAPMAN, CINDY S
4212 OAK LANE
ST. AUGUSTINE, FL 32086 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:

02/10/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CHAPMAN, CINDY S
Address: 158 LAKE STREET
City-St-Zip: POMONA PARK, FL 32181

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CHAPMAN, CINDY S
Address: 4212 OAK LANE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: MGR () Change (X) Addition
Name: CHAPMAN, JOHN R
Address: 4212 OAK LANE
City-St-Zip: ST. AUGUSTINE, FL 32086

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: CINDY S. CHAPMAN

MGRM

02/10/2009

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