

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000027840

FILED  
Mar 23, 2009  
Secretary of State

**Entity Name:** FRIENDS OF INDIAN RIVER TRAP & SKEET CLUB, LLC

**Current Principal Place of Business:**

1650 51ST COURT  
VERO BEACH, FL 32966

**New Principal Place of Business:**

**Current Mailing Address:**

1650 51ST COURT  
VERO BEACH, FL 32966

**New Mailing Address:**

**FEI Number:** 02-0803586

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BARKETT, BRUCE D  
756 BEACHLAND BOULEVARD  
VERO BEACH, FL 32963 US

**Name and Address of New Registered Agent:**

WEAVER, BRIAN D  
1650 51 ST. COURT  
VERO BEACH, FL 32966 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:** BRIAN WEAVER

03/23/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** WEAVER, BRIAN  
**Address:** 1650 51ST COURT  
**City-St-Zip:** VERO BEACH, FL 32966

**Title:** MGRM ( ) Delete  
**Name:** FIELDS, ROBERT  
**Address:** 1650 51ST COURT  
**City-St-Zip:** VERO BEACH, FL 32966

**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:** BRIAN WEAVER

MGRM

03/23/2009

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