

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000028098

FILED  
Mar 09, 2009  
Secretary of State

Entity Name: LAZY MORNING VENTURES, LLC

## Current Principal Place of Business:

829 HOLBROOK CIRCLE  
FORT WALTON BEACH, FL 32547 US

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 4084  
JEFFERSON, GA 30549 US

## New Mailing Address:

POST OFFICE BOX 4094  
FORT WALTON BEACH, FL 32549 US

FEI Number: 20-8703789

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEAN, THOMAS O  
829 HOLBROOK CIRCLE  
FORT WALTON BEACH, FL 32547 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: DEAN, DARLENE  
Address: 829 HOLBROOK CIRCLE  
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: MGR ( ) Delete  
Name: DEAN, THOMAS O  
Address: 829 HOLBROOK CIRCLE  
City-St-Zip: FORT WALTON BEACH, FL 32547 US

## 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: DARLENE DEAN

MGR

03/09/2009

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