

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000036519

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: SUZANNE NEFF AND ASSOCIATES, LLC

**Current Principal Place of Business:**

7069 KEY HAVEN ROAD  
306  
SEMINOLE, FL 33777

**New Principal Place of Business:**

**Current Mailing Address:**

7069 KEY HAVEN ROAD  
306  
SEMINOLE, FL 33777

**New Mailing Address:**

FEI Number: 68-0647737

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NEFF, LINDA S  
7069 KEY HAVEN ROAD  
306  
SEMINOLE, FL 33777 US

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

NEFF, SUZANNE  
7069 KEY HAVEN ROAD  
306  
SEMINOLE, FL 33777 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: SUZANNE NEFF

03/20/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: NEFF, LINDA S  
Address: 7069 KEY HAVEN ROAD, #306  
City-St-Zip: SEMINOLE, FL 33777

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: NEFF, SUZANNE S  
Address: 7069 KEY HAVEN ROAD, #306  
City-St-Zip: SEMINOLE, FL 33777

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: SUZANNE NEFF

MS.

03/20/2009

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