2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 03, 2009
Secretary of State

DOCUMENT# L07000039791

Entity Name: ETAC ASSOCIATES, LLC

Current Principal Place of Business:

18151 N.E. 31 COURT, #201
AVENTURA, FL 33160

New Principal Place of Business:

Current Mailing Address:

18151 N.E. 31 COURT, #201
AVENTURA, FL 33160

New Mailing Address:

FEI Number: 20-8892278 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WASHINGTON, LYNN C
701 BRICKELL AVENUE, SUITE 3000
MIAMI, FL 33131 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: MGRM ( ) Delete
Name: GRASS, OLIVER L
Address: 18151 N.E. 31 COURT, #201
City-St-Zip: AVENTURA, FL 33160

Title: MGRM ( ) Delete
Name: HAMILTON, JULIUS H
Address: 495 SW 1ST ST
City-St-Zip: S BAY, FL 33493

Title: MGRM ( ) Delete
Name: MOORER, KENNETH
Address: 5403 BANYAN LN
City-St-Zip: TAMARAC, FL 33319

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: GROSS, OLIVER L
Address: 18151 N.E. 31 COURT, #201
City-St-Zip: AVENTURA, FL 33160

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: OLIVER L. GROSS MNGR 03/03/2009

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