## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000039835

Address:

City-St-Zip:

Entity Name: XSELL ENTERPRISES, LLC

FILED Feb 20, 2009 Secretary of State

16860 US HWY 19 NORTH LOT#122

CLEARWATER, FL 33764

**Current Principal Place of Business: New Principal Place of Business:** 2243 ASHBURY DR CLEARWATER, FL 33764 **Current Mailing Address: New Mailing Address:** 2243 ASHBURY DR CLEARWATER, FL 33764 FEI Number: 20-8852764 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FULLER, MATTHEW 2243 ASHBURY DR CLEARWATER, FL 33764 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete FULLER, MATTHEW Name: Name: Address: 2243 ASHBURY DR Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: FULLER, DONNA Name: Address: 2243 ASHBURY DR Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: Title: () Delete Title: MGR ( ) Change (X) Addition Name: STEADMAN, DARYL Name:

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.

Address:

City-St-Zip:

SIGNATURE: MATTHEW FULLER MGR 02/20/2009