

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000044693

FILED
Oct 09, 2009
Secretary of State

Entity Name: ZCCCA DAVIS INVESTMENTS, LLC

Current Principal Place of Business:

6340 NW 5TH WAY
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

3147 NW 60TH STREET
BOCA RATON, FL 33496

Current Mailing Address:

6340 NW 5TH WAY
FORT LAUDERDALE, FL 33309

New Mailing Address:

3147 NW 60TH STREET
BOCA RATON, FL 33496

FEI Number: 20-8925652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOBIN & REYES, P.A.
5355 TOWN CENTER ROAD
SUITE 204
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

MARSHALL, DAVIS
3147 NW 60TH STREET
BOCA RATON, FL 33496 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: MARSHALL DAVIS

10/09/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DAVIS, MARSHALL L
Address: 6340 NW 5TH WAY
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGRM (X) Delete
Name: DAVIS, LORI L
Address: 6340 NW 5TH WAY
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DAVIS, MARSHALL L
Address: 3147 NW 60TH STREET
City-St-Zip: BOCA RATON, FL 33496

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: MARSHALL DAVIS

MGRM

10/09/2009

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