

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000046891

FILED
Apr 06, 2009
Secretary of State

Entity Name: LIBRE LLC

Current Principal Place of Business:

12456 GATELY OAKS RD S
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

12917 RIVERMIST WAY
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 56-2656843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUMAN, JESSIE L
12917 RIVERMIST LANE
JACKSONVILLE, FL 32224 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: BAUMAN, JESSIE
Address: 12917 RIVERMIST LANE
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM () Delete
Name: CULBREATH, MARY ANN
Address: 12456 GATELY ROAD S
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGRM () Delete
Name: VICKERS, DINA
Address: 3266 ANTIGUA DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JESSIE LYNN BAUMAN

MGRM

04/06/2009

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