2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# L07000057604

Entity Name: ELABORWRITE, LLC

Current Principal Place of Business:

2107 W. PLATT STREET
TAMPA, FL 33606 US

New Principal Place of Business:

4017 BARCELONA
TAMPA, FL 33629 US

Current Mailing Address:

PO BOX 18682
TAMPA, FL 33679 US

New Mailing Address:

FEI Number: 26-0347164 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASKEY, JOHN R
625 E. TWIGGS STREET
SUITE 102
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

CASKEY, JOHN
4017 BARCELONA
TAMPA, FL 33629 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: JOHN CASKEY 04/08/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: CASKEY, JOHN R
Address: PO BOX 18682
City-St-Zip: TAMPA, FL 33679 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: CASKEY, JOYCE
Address: PO BOX 18682
City-St-Zip: TAMPA, FL 33679 US

Title: MGR ( ) Change (X) Addition
Name: CASKEY, JOHN
Address: PO BOX 18682
City-St-Zip: TAMPA, FL 33679

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: JOHN CASKEY MGR 04/08/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date