

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000063687

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** TURNKEY CONCEPTS OF AMERICA,LLC

**Current Principal Place of Business:**

15861 62ND PLACE NORTH  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

15861 62ND PLACE NORTH  
LOXAHATCHEE, FL 33470

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HALL, ALIN L  
15861 62ND PLACE NORTH  
LOXAHATCHEE, FL 33470 US

**Name and Address of New Registered Agent:**

HALL, CHRISTINE M  
15861 62ND PLACE NORTH  
LOXAHATCHEE, FL 33470 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: CHRISTINE M HALL

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HALL, CHRISTINE M  
Address: 15861 62ND PLACE NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

**ADDITIONS/CHANGES:**

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: CHRISTINE M HALL

MGR

04/30/2009

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