

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000072267

Entity Name: MARTIN OSTEEN LLC

FILED  
Apr 24, 2009  
Secretary of State

**Current Principal Place of Business:**

11819 HAZEN AVE  
THONOTOSASSA, FL 33592

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2050  
SEFFNER, FL 33584

**New Mailing Address:**

FEI Number: 32-0210044

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAUER, MIRIAM  
3611 RANCH ROAD  
VALRICO, FL 33596 US

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

LAUER, MIRIAM  
11819 HAZEN AVE  
THONOTOSASSA, FL 33592 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:

04/24/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LAUER, MIRIAM  
Address: PO BOX 2050  
City-St-Zip: SEFFNER, FL 33584

Title: MGRM ( ) Delete  
Name: MANNING, SALLY A  
Address: PO BOX 2050  
City-St-Zip: SEFFNER, FL 33584

**ADDITIONS/CHANGES:**

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: MIRIAM LAUER

MEMB

04/24/2009

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