

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000072648

FILED
May 01, 2009
Secretary of State

Entity Name: DAVID PEARCE ENTERPRISES, LLC

Current Principal Place of Business:

12440 CHOCTAW TRAIL
HUDSON, FL 34669

New Principal Place of Business:

14129 US HIGHWAY 19
HUDSON, FL 34667

Current Mailing Address:

12440 CHOCTAW TRAIL
HUDSON, FL 34669

New Mailing Address:

FEI Number: 77-0683012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PEARCE, DAVID A OWNER
12440 CHOCTAW TRAIL
HUDSON, FL 34669 US

Name and Address of New Registered Agent:

KRISTINE M BIGELOW CPA PA
6630 EMBASSY BLVD
SUITE B
PORT RICHE, FL 34668 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: KRISTINE M BIGELOW

05/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PEARCE, DAVID
Address: 12440 CHOCTAW TRAIL
City-St-Zip: HUDSON, FL 34669

Title: MGR (X) Delete
Name: DAVID, PEARCE
Address: 12440 CHOCTAW TRAIL
City-St-Zip: HUDSON, FL 34669

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Name: DAVID, PEARCE
Address: 12440 CHOCTAW TRAIL
City-St-Zip: HUDSON, FL 34669

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PEARCE, DAVID
Address: 12440 CHOCTAW TRAIL
City-St-Zip: HUDSON, FL 34669

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

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

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: DAVID PEARCE

MGRM

05/01/2009

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