## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000076304

Entity Name: FIVEASH-MILLER, LLC

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

616 ORBY STREET 2166 STAFF ROAD

PENSACOLA, FL 32534 US CANTONMENT, FL 32533 US

Current Mailing Address: New Mailing Address:

616 ORBY STREET 2166 STAFF ROAD

PENSACOLA, FL 32534 US CANTONMENT, FL 32533 US

FEI Number: 59-3583435 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

FIVEASH, JAMES B FIVEASH, JAMES B 616 ORBY STREET 2166 STAFF ROAD

PENSACOLA, FL 32534 US CANTONMENT, FL 32533 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: JAMES B. FIVEASH 04/14/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MILLER, ROY W
 Name:

 Address:
 3331 EAST KINGSFIELD ROAD
 Address:

 City-St-Zip:
 PENSACOLA, FL 32514 US
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MILLER, PATRICIA G
 Name:

 Address:
 3331 EAST KINGSFIELD ROAD
 Address:

 City-St-Zip:
 PENSACOLA, FL 32514 US
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 FIVEASH, JAMES B
 Name:

 Address:
 616 ORBY STREET
 Address:

 City-St-Zip:
 PENSACOLA, FL 32534 US
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 FIVEASH, SARA G
 Name:

 Address:
 616 ORBY STREET
 Address:

 City-St-Zip:
 PENSACOLA, FL 32534 US
 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: JAMES B. FIVEEASH MGR 04/14/2009