2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# L07000076805

Entity Name: CURTIS RAY ANDREWS-UNO LLC

Current Principal Place of Business:

5 ARBOR CLUB
211
PONTE VEDRA, FL 32082

New Principal Place of Business:

Current Mailing Address:

5 ARBOR CLUB
211
PONTE VEDRA, FL 32082

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

ANDREWS, CURTIS R
5 ARBOR CLUB
211
PONTE VEDRA, FL 32082 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	ANDREWS, CURTIS R	
Address:	5 ARBOR CLUB 211	
City-St-Zip:	PONTE VEDRA, FL 32082	
Title:	MGRM	( ) Delete
Name:	ANDREWS, HOLLY H	
Address:	5 ARBOR CLUB 211	
City-St-Zip:	PONTE VEDRA, FL 32082	
Title:	MGRM	( ) Delete
Name:	ANDREWS, MARY	
Address:	13714 MILLS AVE	
City-St-Zip:	SILVER SPRING, MD 20904	

ADDITIONS/CHANGES:

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: CURTIS ANDREWS MGRM 05/01/2008

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