2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
2009 APR -1 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L07000078323

1. Entity Name
YES CAN DO, LLC

Principal Place of Business	Mailing Address
2643 GULF TO BAY SUITE 1560-446 CLEARWATER, FL 33759	2643 GULF TO BAY SUITE 1560-446 CLEARWATER, FL 33759

03042008 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
411 CLEVELAND STREET	411 CLEVELAND STREET 161
Suite, Apt. #, etc.: 161	Suite, Apt. #, etc.: —
City & State: CLEARWATER - FLORIDA	City & State: CLEARWATER - FLORIDA
Zip: 33755 Country: PINELLAS	Zip: 33755 Country: PINELLAS

4. FEI Number: 02-0812546 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
YARISH, DAVID L 2643 GULF TO BAY SUITE 1560-446 CLEARWATER, FL 33759	Name: DAVID L. YARISH Street Address (P.O. Box Number is Not Acceptable): 411 CLEVELAND STREET 161 City: CLEARWATER **FL** Zip Code: FLA.

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: David L. Yarish 3/09/09
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM YARISH, DAVID L 2643 GULF TO BAY SUITE 1560-446 CLEARWATER, FL 33759	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM YARISH, DAVID L. 411 CLEVELAND STREET 161 CLEARWATER, FLA. 33755	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	200147996942 03/30/09--01050--029 **143.75	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 L. Yarish 3/09/09
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #