

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000085797

FILED
Jul 14, 2009
Secretary of State

Entity Name: ELLIOTT RETAIL LLC

Current Principal Place of Business:

8414 SW 44TH TERRACE
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

8414 SW 44TH TERRACE
GAINESVILLE, FL 32608

New Mailing Address:

1316 SW 112TH STREET
GAINESVILLE, FL 32607

FEI Number: 26-0889119 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:

ELLIOTT, BRIAN L
8414 SW 44TH TERRACE
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

ELLIOTT, BRIAN L
1316 SW 112TH STREET
GAINESVILLE, FL 32607 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: BRIAN ELLIOTT

07/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ELLIOTT, BRIAN L
Address: 8414 SW 44TH TERRACE
City-St-Zip: GAINESVILLE, FL 32608

Title: MGR (X) Delete
Name: PRATT, KYLE
Address: 10815 SW 11TH LANE
City-St-Zip: GAINESVILLE, FL 326071206

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: BRIAN ELLIOTT

MGR

07/14/2009

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