

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000086380

Entity Name: T.O.P.S., LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

101 CENTURY 21 DRIVE
STE 113
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

101 CENTURY 21 DRIVE
STE 113
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 26-0730866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STOKES, COLEMAN
101 CENTURY 21 DRIVE
STE 113
JACKSONVILLE, FL 32216 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: STOKES, COLEMAN
Address: 101 CENTURY 21 DRIVE STE 113
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM () Delete
Name: LECLERE, WILLIAM
Address: 101 CENTURY 21 DRIVE STE 113
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: STOKES, MARIE
Address: 101 CENTURY 21 DRIVE STE 113
City-St-Zip: JACKSONVILLE, FL 32216

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: COLEMAN STOKES

MGRM

04/29/2009

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