

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000091482

FILED
Apr 24, 2009
Secretary of State

Entity Name: THE REVERED GROUP OF AMERICA, LLC

Current Principal Place of Business:

4338 CHELSA HARBOR DR. W.
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

4338 CHELSA HARBOR DR. W.
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 26-0697495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TILLEY & CALLAHAN, P.A. CPAS
4465 BAYMEADOWS RD. STE 3
JACKSONVILLE, FL 32217 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: P () Delete
Name: RIVIERE, KEVIN
Address: 4338 CHELSA HARBOR DR. W.
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM () Delete
Name: RIVIERE, JOHN P
Address: 9121 SW 69TH CT
City-St-Zip: MIAMI, FL 33156

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: GUST G. SARRIS,ESQ.

MGRM

04/24/2009

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