

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000103795

Entity Name: ASPIREPR, LLC.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

1613 FRUITVILLE ROAD
SARASOTA, FL 34236 US

New Principal Place of Business:

2566 EAST PAUSTAN COURT
SARASOTA, FL 34237 US

Current Mailing Address:

1613 FRUITVILLE ROAD
SARASOTA, FL 34236 US

New Mailing Address:

2566 EAST PAULSTAN COURT
SARASOTA, FL 34237 US

FEI Number: 26-0809827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAMERON, SUZANNE
1613 FRUITVILLE ROAD
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

DAMERON, SUZANNE E
2566 EAST PAULSTAN COURT
SARASOTA, FL 34237 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: SUZANNE DAMERON

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DAMERON, SUZANNE
Address: 1613 FRUITVILLE ROAD
City-St-Zip: SARASOTA, FL 34236 US

Title: MGRM (X) Delete
Name: CARLSON, GRACE
Address: 1613 FRUITVILLE ROAD
City-St-Zip: SARASOTA, FL 34236 US

ADDITIONS/CHANGES:

Title: CEO (X) Change () Addition
Name: DAMERON, SUZANNE
Address: 2566 EAST PAULSTAN COURT
City-St-Zip: SARASOTA, FL 34237 US

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: SUZANNE DAMERON

MS.

04/28/2009

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