

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000104886

FILED
Jul 08, 2008
Secretary of State

Entity Name: SNOOKAHOLICS ANONYMOUS, LLC

Current Principal Place of Business:

9600 TREASURE LANE
ST. PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

9600 TREASURE LANE
ST. PETERSBURG, FL 33702

New Mailing Address:

FEI Number: 26-1411278 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:

Name and Address of New Registered Agent:

ROSENDE, CHRIS
9600 TREASURE LANE
ST. PETERSBURG, FL 33702 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ROSENDE, CHRIS
Address: 9600 TREASURE LANE
City-St-Zip: ST. PETERSBURG, FL 33702

Title: MGRM () Delete
Name: SILVA, ALEJANDRO
Address: 4408 W. CARMEN ST.
City-St-Zip: TAMPA, FL 33609

Title: MGRM () Delete
Name: ROSENDE, JOHN
Address: 2812SAUNDERS DRIVE
City-St-Zip: TAMPA, FL 33611

Title: MGRM () Delete
Name: TAYLOR, AARON
Address: 2221 RIVERSIDE DR.
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES:

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

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

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: CHRISTOPHER ROSENDE

MR

07/08/2008

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