

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105715

FILED
Apr 30, 2009
Secretary of State

Entity Name: EDELIVER LLC

Current Principal Place of Business:

893 OAK LEAF CT
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

893 OAK LEAF CT
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 26-1256699

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAUSINGER, MICHAEL C
893 OAK LEAF CT
ALTAMONTE SPRINGS, FL 32714 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: HAUSINGER, MICHAEL C
Address: 893 OAK LEAF CT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM () Delete
Name: HAUSINGER, LINDA M
Address: 893 OAK LEAF CT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM () Delete
Name: HAUSINGER, NATHAN C
Address: 893 OAK LEAF CT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM () Delete
Name: HAUSINGER, AIMEE F
Address: 202 MOSSWOOD CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

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: MGRM (X) Change () Addition
Name: HAUSINGER, AIMEE F
Address: 112 ESSEX AVE APT 4D
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: MICHAEL HAUSINGER

MGRM

04/30/2009

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