

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000107818

Entity Name: 4 PAWS, LLC

FILED
Mar 10, 2009
Secretary of State

Current Principal Place of Business:

6622 SOUTHPOINT DRIVE SOUTH
SUITE 160
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

6622 SOUTHPOINT DRIVE SOUTH
SUITE 160
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 68-0659917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORGAN, ROBERT M
10110 SAN JOSE BOULEVARD
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

COKER, JEAN C
6622 SOUTHPOINT DRIVE SOUTH
SUITE 160
JACKSONVILLE, FL 32216 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: JEAN C. COKER

03/10/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HELEN A. CARR REVOKA, BLE LIVING TRU S T
Address: 6622 SOUTHPOINT DRIVE SOUTH, SUITE 160
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES:

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: HELEN A. CARR

MGRM

03/10/2009

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