

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000108116

Entity Name: DUU...UUVAA...AAL, LLC

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

31 WEST ADAMS STREET
APT. #605
JACKSONVILLE, FL 32202

New Principal Place of Business:

2977 MANDARIN HOLLOW DRIVE
JACKSONVILLE, FL 32257

Current Mailing Address:

31 WEST ADAMS STREET
APT. #605
JACKSONVILLE, FL 32202

New Mailing Address:

2977 MANDARIN HOLLOW DRIVE
JACKSONVILLE, FL 32257

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLE, BLAKE H
31 WEST ADAMS STREET
APT. #605
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

COLE, BLAKE H
885 SEMINOLE ROAD
ATLANTIC BEACH, FL 32233 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: BLAKE H. COLE

04/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PENNA, RONALD J
Address: 2977 MANDARIN HOLLOW DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

Title: MGRM () Delete
Name: COLE, BLAKE H
Address: 31 WEST ADAMS STREET
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: COLE, BLAKE H
Address: 885 SEMINOLE ROAD
City-St-Zip: ATLANTIC BEACH, FL 32233

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: BLAKE H. COLE

MGRM

04/16/2009

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