

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000110616

Entity Name: ARTHUR TRUMAN LLC

FILED
Jan 24, 2009
Secretary of State

Current Principal Place of Business:

2270 GRIFFIN ROAD
SUITE 459
LAKELAND, FL 33810 US

New Principal Place of Business:

Current Mailing Address:

2270 GRIFFIN ROAD
SUITE 459
LAKELAND, FL 33810 US

New Mailing Address:

FEI Number: 26-1368844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MINOR, CHARITY G
2270 GRIFFIN ROAD
SUITE 459
LAKELAND, FL 33810 US

Name and Address of New Registered Agent:

MINOR, TIFFANY A
2270 GRIFFIN ROAD
SUITE 459
LAKELAND, FL 33810 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: TIFFANY A MINOR

01/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MINOR, CHARITY G
Address: 2270 GRIFFIN ROAD, SUITE 459
City-St-Zip: LAKELAND, FL 33810 US

Title: MGR () Delete
Name: MINOR, TIFFANY A
Address: 2270 GRIFFIN ROAD, SUITE 459
City-St-Zip: LAKELAND, FL 33810 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MINOR, LARRY R
Address: 2270 GRIFFIN ROAD, SUITE 459
City-St-Zip: LAKELAND, FL 33810 US

Title: MGRM (X) Change () Addition
Name: MINOR, TIFFANY A
Address: 2270 GRIFFIN ROAD, SUITE 459
City-St-Zip: LAKELAND, FL 33810 US

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: LARRY R MINOR

MGRM

01/24/2009

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