2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000112360

Entity Name: SUB CITY, LLC

FILED Apr 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1030 S VOLUSIA AVE 502 N. SPRING GARDEN AVE ORANGE CITY, FL 32763

SUITE 2

DELAND, FL 32720

Current Mailing Address: New Mailing Address:

502 N. SPRING GARDEN AVE. PO BOX 2082

SUITE 2 DELAND, FL 32721

DELAND, FL 32720

FEI Number: 26-1363183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ABELL, WILLIAM C II ABELL, WILLIAM C II 1030 S VOLUSIA AV 1040 S VOLUSIA AV

ORANGE CITY, FL 32763 US ORANGE CITY, FL 32763 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: 04/18/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: MGRM (X) Change () Addition

ABELL, WILLIAM C II ABELL, WILLIAM C II Name: Name: Address: 1030 S VOLUSIA AVE Address: 1040 S VOLUSIA AVE City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip: ORANGE CITY, FL 32763

Title: MGRM () Delete Title: () Change () Addition

SOLLOWEEN, TASHA K Name: Name: Address: 615 S CEDAR AVE Address: City-St-Zip: ORANGE CITY, FL 32763 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.

MGRM SIGNATURE: WILLIAM C. ABELL II 04/18/2009